01/30/2008 19:12

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 10 0 1 2007 10 3 1 2007 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 0 1 30 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name American Hospital Association PAC

FEC Form 3X (Rev. 02/2003)

м м 1 0 м м 1 0 D D D 1 D D 2007 3 1 2007 Report Covering the Period: From: To: COLUMN A COLUMN B

	This Period	Calendar Year-to-Date
a) Cash on Hand January 1 Ž007 Y		1038787.58
b) Cash on Hand at Begining of Reporting Period	967364.25	
c) Total Receipts (from Line 19)	254668.95	1164146.95
d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1222033.20	2202934.53
Fotal Disbursements (from Line 31)	98405.51	1079306.84
Cash on Hand at Close of Reporting Period subtract Line 7 from Line 6(d))	1123627.69	1123627.69
Debts and Obligations owed TO he committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations owed BY he committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	January 1 Ž007 Danuary 1 Ž007 Total Receipts (from Line 19)	This Period a) Cash on Hand January 1 Ž007 b) Cash on Hand at Begining of Reporting Period

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

1 0

From:

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2007

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I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	114111.04	418970.68
	(ii) Unitemized	57720.39	264484.22
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	171831.43	683454.90
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	6750.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	171831.43	690204.90
2.	Transfers From Affiliated/Other Party Committees	82450.00	465975.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	2022.40
	to Federal candidates and Other Political Committees	0.00	2500.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	387.52	3444.65
8.			
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	254668.95	1164146.95
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	254668.95	1164146.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 405.51 4673.74 Expenditures..... (c) Total Operating Expenditures 405.51 4673.74 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 98000.00 1073580.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 750.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 750.00 (add Lines 28(a), (b), and (c)) 0.00 303.10 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 98405.51 1079306.84 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 98405.51 1079306.84

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	171831.43	690204.90
34.	Total Contribution Refunds (from Line 28(d))	0.00	750.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	171831.43	689454.90
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	405.51	4673.74
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	2022.40
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	405.51	2651.34

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 156 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Sandra Elza Mailing Address P O Box 720 City Ripley FEC ID number of contributing federal political committee. Name of Employer Jackson General Hospital Receipt For: Primary General Other (specify)	State Zip Code WV 25271-0720 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 14625353 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Ms. Dorothy Oakes Mailing Address 2042 Henry Clay Drive City Morgantown FEC ID number of contributing federal political committee. Name of Employer West Virginia University Hospitals Receipt For: Primary General Other (specify)	State Zip Code WV 26508-0020 C Occupation VP CNO Aggregate Year-to-Date 225.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Joseph Endrich, , M.D. Mailing Address 601 Colliers Way City Weirton FEC ID number of contributing federal political committee. Name of Employer Weirton Medical Center Receipt For: Primary General Other (specify)	State Zip Code WV 26062-5014 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	·····	625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 156 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. George Perich		Date of Receipt
Mailing Address 905 Riverview Drive		10 09 2007
City Fairmont	State Zip Code WV 26554-1435	Transaction ID: 14625369
FEC ID number of contributing federal political committee.	C 20004-1400	Amount of Each Receipt this Period 250.00
Name of Employer Fairmont General Hospital	Occupation Vice President Human Resourcesand L	lega
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Mark Doak		Date of Receipt
Mailing Address P O Box 1484		10 09 YYYYY 10 09 2007
City	State Zip Code	Transaction ID: 14625370
Elkins	WV 26241-1484	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	262.50
Name of Employer Davis Memorial Hospital	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	262.50	
Full Name (Last, First, Middle Initial) Zarina Rasheed, MD		Date of Receipt
Mailing Address 56 Timberidge Drive		10 09 2007
City	State Zip Code	Transaction ID: 14625371
Beckley	WV 25801-3610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Beckley Appalachian Regio- nal Hospital	Occupation Medical Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		762.50

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 156 (check only one) X 11a
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Bruce McClymonds Mailing Address Medical Center Drive		Date of Receipt
			10 09 2007
	City Morgantown	State Zip Code WV 26506-4749	Transaction ID: 14625372
	FEC ID number of contributing federal political committee.	C 20300-4749	Amount of Each Receipt this Period 500.00
	Name of Employer West Virginia University Hospitals	Occupation President and Chief Executive Office	r
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
	Full Name (Last, First, Middle Initial) Mr Robert D Whitler		Date of Receipt
	Mailing Address 5 Evergreen Drive		10 09 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 14625373
	Elkview	WV 25071-9314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Charleston Area Medical Center	Occupation Vice President Government and Com	nmunit
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
	Full Name (Last, First, Middle Initial) Mr. Tony E Atkins		Date of Receipt
	Mailing Address 1 Amalia Drive		10 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 14625374
	Buckhannon	WV 26201-2276	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer St. Joseph's Hospital of Buckhannon	Occupation Chief Executive Officer	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	-
	Other (specify) ▼	500.00	
	NIDTOTAL of Descripto This Descriptoral)		1500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 7
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any pename and address of any political committed	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr Larry C Hudson		Date of Receipt
	Mailing Address 5035 Bennington Driv		10 / 09 / Y Y Y Y Y
	Charleston	State Zip Code WV 25313-2055	Transaction ID: 14625375
	Charleston FEC ID number of contributing federal political committee.	WV 25313-2055	Amount of Each Receipt this Period 500.00
	Name of Employer Charleston Area Medical Center Receipt For: Primary General	Occupation Executive Vice President and Chi Aggregate Year-to-Date ▼	
	Other (specify) Full Name (Last, First, Middle Initial) Mr. David L Ramsey	500.00	Date of Receipt
	Mailing Address P O Box 1547		1 0 0 9 2 0 0 7
	City	State Zip Code	Transaction ID: 14625376
	Charleston	WV 25326-1547	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Charleston Area Medical Center Health	Occupation President and Chief Executive Of	fficer
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Mr. Todd Campbell		Date of Receipt
	Mailing Address 125 Water Side Circle)	10 09 2007
	City	State Zip Code	Transaction ID: 14625377
	Winfield FEC ID number of contributing federal political committee.	WV 25213-9551	Amount of Each Receipt this Period 500.00
	Name of Employer St. Mary's Medical Center	Occupation Vice President Financial Affairs a	and C
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1	1500.00

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 156 (check only one) X
or for comm	ation copied from such Reports and St mercial purposes, other than using the OF COMMITTEE (In Full) can Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Dr. Gler Mailing City South FEC ID	me (Last, First, Middle Initial) nn Crotty, , Jr., M.D Address 36E Coventry Road Charleston number of contributing political committee.	State WV	Zip Code 25309	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Center Receipt	of Employer ston Area Medical t For: rimary		n e Vice President and Chief C e Year-to-Date ▼ 500.00	Ope
Dr. John Mailing	me (Last, First, Middle Initial) n McKnight Address 210 Rivercrest Drive			Date of Receipt 10 09 7 2007
FEC ID federal	number of contributing political committee.	State WV C	Zip Code 26508-9000	Amount of Each Receipt this Period 500.00
<u>al</u> Receipt	of Employer galia General Hospit- t For: rimary	Medical [
Mr. Rog	me (Last, First, Middle Initial) per S. John Address P O Box 506			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Phillip	·	State KS	Zip Code 67661-0506	Transaction ID: 14626235 Amount of Each Receipt this Period
federal	political committee. of Employer Plains Health Allia-	Occupation Presiden	n t and Chief Executive Office	250.00 r
Receipt P			e Year-to-Date ▼ 250.00	
SUBTOTA	AL of Receipts This Page (optional)		······	1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 156 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gregory S Lundstrom Mailing Address 605 West Lincoln S City Lindsborg FEC ID number of contributing federal political committee. Name of Employer Lindsborg Community Hospital Receipt For:	State Zip Code KS 67456-2328 C Occupation Administrator and Chief Executive Offi Aggregate Year-to-Date	Date of Receipt M M J D D J 2007 Transaction ID: 14626236 Amount of Each Receipt this Period 250.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Terry R Lambert, , CHE Mailing Address 1510 W. 20th Park	250.00 Place	Date of Receipt
City Emporia FEC ID number of contributing federal political committee. Name of Employer Newman Regional Health Receipt For:	State Zip Code KS 66801-5790 C Occupation Chief Executive Officer Aggregate Year-to-Date	Transaction ID: 14626237 Amount of Each Receipt this Period 250.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Peter H Alexander Mailing Address 2001 West 86th St	250.00 reet, 7th FI	Date of Receipt 1 0 1 0 2 0 0 7
City Indianapolis FEC ID number of contributing federal political committee.	State Zip Code IN 46260-1902 C	Transaction ID: 14626313 Amount of Each Receipt this Period 250.00
Name of Employer Seton Specialty Hospital of Indianapol Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (options	al)	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	λ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 156 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		2.000 to 4.1, pointed to	
Full Name (Last, First, Middle Initial) Mr. Kyle De Fur, , FACHE			Date of Receipt
Mailing Address 8402 Harcourt Road	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Indianapolis	State IN	Zip Code 46260-2074	Transaction ID: 14626314 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer St. Vincent Hospitals and Health Servi	Occupation Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Ms. Sarah Patterson			Date of Receipt
Mailing Address 1100 Ninth Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State WA	Zip Code	Transaction ID: 14629910
Seattle FEC ID number of contributing federal political committee.	C	98101-2756	Amount of Each Receipt this Period 250.00
Name of Employer Virginia Mason Medical Ce-	Occupation Administ		
nter Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Nancy Steiger			Date of Receipt
Mailing Address 2901 Squalicum Pa	ırkway		10 01 2007
City Bellingham	State WA	Zip Code 98225-1851	Transaction ID: 14629911 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0000	250.00
Name of Employer St. Joseph Hospital	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	l)	_	750.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any perso he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Gail C Larson		Date of Receipt
Mailing Address P O Box 1147	7.01	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Everett	State Zip Code WA 98206-1147	Transaction ID: 14629912 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 30200 1147	500.00
Name of Employer Formerly Providence Evere- tt Medical Ce Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. James A Wathen		Date of Receipt
Mailing Address 900 11th Street SE		10 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14643167
Bandon	OR 97411-9114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	675.00
Name of Employer Southern Coos Hospital and Health Cent	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	
Full Name (Last, First, Middle Initial) Mrs. Rosemari Davis		Date of Receipt
Mailing Address 2700 SE Stratus Ave	enue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14643170
McMinnville	OR 97128-6255	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	212.00
Name of Employer Willamette Valley Medical Center	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	212.00	
SUBTOTAL of Receipts This Page (optional)		1387.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Jay Henry		Date of Receipt
Mailing Address 2460 SE Bitterbrush		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Madras	State Zip Code OR 97741-9443	Transaction ID: 14643173
FEC ID number of contributing federal political committee.	C 97741-9443	Amount of Each Receipt this Period 202.00
Name of Employer Mountain View Hospital Di- strict	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	
Full Name (Last, First, Middle Initial) Mr. Andrew S. Davidson	1	Date of Receipt
Mailing Address 2123 Ridgebrook Driv	е	10 01 2007
City	State Zip Code	Transaction ID: 14643174
West Linn	OR 97068-1943	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Oregon Association of Hos- pitals & Heal	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Gwen Dayton	1	Date of Receipt
Mailing Address 12781 SW Terraview	Drive	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14643175
Tigard	OR 97224-0703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oregon Association of Hos- pitals & Heal	Occupation Vice President & General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	1	952.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 156 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may no name and addre	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Kevin Earls			Date of Receipt
Mailing Address 671 Kingwood Drive, N	1W		10 01 2007
City	State	Zip Code	Transaction ID: 14643176
Salem	OR	97304-3656	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Oregon Association of Hos- pitals & Heal	Occupation Vice Presid	ent, Finance & Health Pol	ic
Receipt For: Primary General Other (specify)	Aggregate Yo	ear-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Steven E Brown, , FACHE			Date of Receipt
Mailing Address 12040 NE 128th Stree	t		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14652813
Kirkland	WA	98034-3013	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Evergreen Healthcare	Occupation Chief Execu	utive Officer	
Receipt For: Primary General Other (specify)	Aggregate Yo	ear-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr. Ronald O'Halloran			Date of Receipt
Mailing Address 36 Klondike Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14652814
Republic	WA	99166-9701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Ferry County Memorial Hos- pital	Occupation Administrat		
Receipt For: Primary General Other (specify) ▼	Aggregate Yo	ear-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		\	1000.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 156 (check only one) X
A 0	ny information copied from such Reports and Sir for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and add	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ \ .	Full Name (Last, First, Middle Initial) Mr. Scott W Bosch Mailing Address 2520 Cherry Avenue City	State	Zip Code	Date of Receipt M
	Bremerton FEC ID number of contributing federal political committee.	C	98310-4270	Amount of Each Receipt this Period 250.00
	Name of Employer Harrison Medical Center Receipt For: Primary General Other (specify) ▼		n t and Chief Executive Office e Year-to-Date ▼ 250.00	r
3.	Full Name (Last, First, Middle Initial) Mr. Thomas Kruse Mailing Address 6860 NW RAnger Way	,		Date of Receipt 1 0 0 8 2 0 0 7
	City	State	Zip Code	Transaction ID: 14652816
	Silverdale FEC ID number of contributing federal political committee.	C	98383-6306	Amount of Each Receipt this Period 250.00
	Name of Employer Harrison Medical Center	Occupatio Vice Pres		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. Mike Miller			Date of Receipt
-	Mailing Address 2520 Cherry Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Bremerton	State WA	Zip Code 98310-4229	Transaction ID: 14652817 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	90510-4229	250.00
	Name of Employer Harrison Medical Center	Occupatio Administ		
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 156 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. John Wallen		Date of Receipt
Mailing Address 2520 Cherry Avenue		10 08 2007
City	State Zip Code	Transaction ID: 14652818
Bremerton	WA 98310-4229	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Harrison Medical Center	Occupation CEO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Rand J Wortman	-1	Date of Receipt
Mailing Address 888 Swift Boulevard		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14652819
Richland	WA 99352-3542	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Kadlec Medical Center	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Harold S Geller	 	Date of Receipt
Mailing Address 315 North 14th Stree	et	M M / D D / Y Y Y Y Y 1 D D / 2 0 0 7
City	State Zip Code	Transaction ID: 14652820
Othello	WA 99344-1297	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Othello Community Hospital	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		750.00

	ILE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
or for comme	on copied from such Reports and S rcial purposes, other than using the COMMITTEE (In Full) In Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Ms. Elaine	(Last, First, Middle Initial) Couture Idress 101 West Eighth Aven	ue State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	umber of contributing itical committee.	WA C	99204-2307	Amount of Each Receipt this Period 250.00
er Receipt Fo		Occupation Vice Pres		
Full Name Mr. Greg F Mailing Ac				Date of Receipt 1 0 0 8 2 0 0 7
City		State	Zip Code	Transaction ID: 14652822
	olley umber of contributing itical committee.	C	98284-4327	Amount of Each Receipt this Period 250.00
Name of E United Ge	mployer neral Hospital	Occupatio	n ecutive Officer	
Receipt Fo			e Year-to-Date ▼ 250.00	
Full Name Mr. James Mailing Ac				Date of Receipt 100008 2007
City		State	Zip Code	Transaction ID: 14652823
	umber of contributing itical committee.	C	98902-3761	Amount of Each Receipt this Period 250.00
<u>spital</u>	mployer alley Memorial Ho-	Occupatio Administ	rator	
Receipt For		Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL	of Receipts This Page (optional)	l		750.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 156 (check only one) X
or fo	information copied from such Reports and St r commercial purposes, other than using the IAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and addr	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. <u>M</u> C E	ull Name (Last, First, Middle Initial) In. Dennis A Popp Italiang Address P O Box 218 Italian	State WA C Occupation Administra	Zip Code 98022-0218 ator and Chief Executive Of	Date of Receipt M M M
R	leceipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 300.00	
3. <u>№</u>	ull Name (Last, First, Middle Initial) rr. Michael D. Wilson failing Address 1228 E. Overbluff			Date of Receipt 10 08 7 2007
<u>S</u> F fe	Spokane EC ID number of contributing ederal political committee.	State WA	Zip Code 99203-3453	Transaction ID: 14652825 Amount of Each Receipt this Period 300.00
S <u>e</u>	lame of Employer lacred Heart Medical Cent- r leceipt For: Primary General Other (specify) ▼	. '	& Chief Operating Officer Year-to-Date ▼ 300.00	
. <u>N</u>	ull Name (Last, First, Middle Initial) fr. Gregg A Davidson failing Address PO Box 1376			Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<u>N</u>	ity Mount Vernon EC ID number of contributing	State WA	Zip Code 98273-1376	Transaction ID: 14652826 Amount of Each Receipt this Period
f∈ N	ederal political committee. Iame of Employer Skagit Valley Hospital	Occupation Chief Ever		300.00
_	leceipt For: Primary General Other (specify) ▼		cutive Officer Year-to-Date ▼ 300.00	
SUE	BTOTAL of Receipts This Page (optional)			900.00

	EMIZED RECEIPTS	for each category of the Detailed Summary Page	
Ar	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any ename and address of any political commi	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
	American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Mr. John T Evans, , Jr. Mailing Address P O Box 1887		Date of Receipt
	City	State Zip Code	1 0 0 8 2 0 0 7 Transaction ID: 14652827
	Wenatchee	WA 98807-1887	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Central Washington Hospit- al	Occupation President and Chief Executive C	Officer
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.0	
 3.	Full Name (Last, First, Middle Initial) Ms. Victoria S. Galanti		Date of Receipt
	Mailing Address 300 Elliott Avenue W. Ste. 300		10 08 7 2007
	City	State Zip Code	Transaction ID: 14652828
	Seattle	WA 98119-4198	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Washington State Hospital Association	Occupation Executive Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.0	00
	Full Name (Last, First, Middle Initial) Mr Robert Broermann		Date of Receipt
	Mailing Address 6015 Poplar Hall Driv		10 08 7 2007
	City	State Zip Code	Transaction ID: 14653214
	Norfolk	VA 23502-3819	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Sentara Healthcare	Occupation Senior Vice President & CFO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.0	00 "
s	UBTOTAL of Receipts This Page (optional) .	1	1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 1	
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr Reese Jackson Mailing Address 103 Anne Glass Road		Date of Receipt	
City	State Zip Code	1 0 0 8 2 0 0 7 Transaction ID: 14653219	
Winchester	VA 22602-6679	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Valley Health System	Occupation Executive Vice President		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Mr. Harry Meador, II		Date of Receipt	
Mailing Address 4925 Boonesboro Roa		10 08 7 2007	
City	State Zip Code	Transaction ID: 14653220	
<u>Lynchburg</u>	VA 24503-2207	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Centra Health	Occupation VP, Director Cardiac Services		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Mr. George W Dawson		Date of Receipt	
Mailing Address 1920 Atherholt Road		10 08 7 9 9 9	
City	State Zip Code	Transaction ID: 14653221	
Lynchburg	VA 24501-1104	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Centra Health	Occupation President and Chief Executive Officer		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
SUBTOTAL of Receipts This Page (optional)		750.00	
TOTAL This Period (last page this line number	<u> </u>		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 156 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may he name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Eileen Dohmann Mailing Address 6508 Flowerdew Hur City Centreville FEC ID number of contributing federal political committee. Name of Employer Mary Washington Hospital Receipt For: Primary General Other (specify)	State VA C Occupation Vice Pres	Zip Code 20120-3755 Dident, Nursing Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Natalie Kaszubowski Mailing Address 300 East 40th Street City Norfolk FEC ID number of contributing federal political committee. Name of Employer Sentara Healthcare Receipt For: Primary General Other (specify)	State VA C Occupation Corporate	Zip Code 23504-1010 Director of Clinical Resour Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Elizabeth Long Mailing Address 7723 Stuart Hall Roa City Richmond FEC ID number of contributing federal political committee. Name of Employer Virginia Hospital & Healthcare Associa Receipt For: Primary General Other (specify)	State VA C Occupation Vice Pres		Date of Receipt M M M / D D N 2007 Transaction ID: 14653239 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)			650.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 156 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Donna Littlepage		Date of Receipt
Mailing Address 610 Broce Drive		1 0 0 8 2 0 0 7
City	State Zip Code	Transaction ID: 14653240
Blacksburg	VA 24060-2802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Carilion Health System	Occupation Vice President, Finance	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Hugh Thornhill		Date of Receipt
Mailing Address 2715 Rosalind Aven	ue, SW	10 08 2007
City	State Zip Code	Transaction ID: 14653247
Roanoke	VA 24014-2329	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Carilion Health System	Occupation Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Matthew Keats		Date of Receipt
Mailing Address 4417 Corporation La	ne	10 08 2007
City	State Zip Code	Transaction ID: 14653260
Virginia Beach	VA 23462-3162	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sentara Virginia Beach Ge- neral Hospita	Occupation VP, Medical Care Manager	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
	1	

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any peen name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. William H. Flannagan, Jr. Mailing Address 3131 Rivanna Court		Date of Receipt
		7' 0 1	10 08 2007
	City Woodbridge	State Zip Code VA 22192-3373	Transaction ID: 14653261 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Potomac Hospital	Occupation Executive Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
. –	Full Name (Last, First, Middle Initial) Mr. John F. Duval		Date of Receipt
	Mailing Address 3307 Brewton Way		10 08 2007
	City	State Zip Code	Transaction ID: 14653265
	Midlothian	VA 23113-3793	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer VCU Health System	Occupation Chief Executive Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify)	500.00	
_	Full Name (Last, First, Middle Initial) Ms. Nancy H Agee		Date of Receipt
	Mailing Address 802 Cherrywood Road	I	10 08 2007
	City	State Zip Code	Transaction ID: 14653266
	Salem 550 ID and the street of	VA 24153-2755	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Chesapeake General Hospit- al	Occupation Director, Volunteer Services	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	250.00	
	SUBTOTAL of Receipts This Page (optional)	1	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 156 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Joseph L Woodin			Date of Receipt
Mailing Address P O Box 2000			10 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Randolph	State VT	Zip Code 05060-2000	Transaction ID: 14653279 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Gifford Medical Center	Occupatio Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Barry G Beeman			Date of Receipt
Mailing Address 17 Belmont Avenue			10 08 2007
City	State VT	Zip Code	Transaction ID: 14653280
Brattleboro FEC ID number of contributing federal political committee.	C	05301-6613	Amount of Each Receipt this Period 500.00
Name of Employer Brattleboro Memorial Hosp- ital	Occupatio Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Peter A Hofstetter			Date of Receipt
Mailing Address P O Box 1370			10 08 2007
City Saint Albans	State VT	Zip Code 05478-1370	Transaction ID: 14653281
FEC ID number of contributing federal political committee.	C	03476-1370	Amount of Each Receipt this Period 250.00
Name of Employer Northwestern Medical Cent- er	Occupatio Chief Exc	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 156 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Jerry Spicer		Date of Receipt
Mailing Address 2635 North 7th Street City	State Zip Code	10 08 2007
Grand Junction	CO 81501-8209	Transaction ID: 14653835 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Mary's Hospital and Medical Center	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. David P Gehant		Date of Receipt
Mailing Address P O Box 9019		10 08 7 2007
City	State Zip Code	Transaction ID: 14653856
Boulder	CO 80301-9019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Boulder Community Hospital	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Richard Eitel		Date of Receipt
Mailing Address P O Box 1326		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14653862
Colorado Springs	CO 80901-1326	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Memorial Health System	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 156 (check only one) X 11a 11b 11c 12
	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. John S. Howard		Date of Receipt
Mailing Address 1362 Arbor Bluffs Circ		10 15 2007
City Ballwin	State Zip Code MO 63021-3702	Transaction ID: 14653867 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	225.00
Name of Employer St. John's Mercy Medical Center	Occupation General Counsel	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Mr. Donald E. Kalicak		Date of Receipt
Mailing Address 160 Hunters Pointe D		10 15 2007
City	State Zip Code	Transaction ID: 14653868
Saint Charles FEC ID number of contributing federal political committee.	MO 63304-7129	Amount of Each Receipt this Period 225.00
Name of Employer St. John's Mercy Health Care	Occupation Director, Planning & Public Policy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Dan Dixon	1	Date of Receipt
Mailing Address 747 Broadway Avenu	е	10 15 2007
City Seattle	State Zip Code WA 98122-4379	Transaction ID: 14653925
FEC ID number of contributing federal political committee.	C 90122-4379	Amount of Each Receipt this Period 250.00
Name of Employer Swedish Health Services	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional) .		700.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	;	
Full Name (Last, First, Middle Initial) Mr. Peter Morgan		Date of Receipt
Mailing Address 2700 125nd Avenue City	State Zip Code	1 0 1 5 2 0 0 7 Transaction ID: 14653926
Redmond	WA 98052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Group Health Eastside Hos- pital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Robert Z. Vovak		Date of Receipt
Mailing Address 9326 Perglen Road		10 15 7 2007
City	State Zip Code	Transaction ID: 14653939
<u>Baltimore</u>	MD 21236-1628	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Maryland Hospital Associa- tion	Occupation Sr. Vice President & CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Ms. Denise Matricciani		Date of Receipt
Mailing Address 4423 Necker Avenue	е	10 15 YYYYY 10 15 2007
City	State Zip Code	Transaction ID: 14653940
<u>Baltimore</u>	MD 21236-2968	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Maryland Hospital Associa- tion	Occupation Vice President, Government Relations	3
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
SUBTOTAL of Receipts This Page (optional		1700.00
TOTAL This Period (last page this line numb	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 156 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Beverly L. Miller		Date of Receipt
Mailing Address 6820 Deerpath Road		10 15 2007
City Elkridge	State Zip Code MD 21075-6234	Transaction ID: 14653941 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Maryland Hospital Associa- tion	Occupation V.P., Professional Activities	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Mr. Calvin M. Pierson	1	Date of Receipt
Mailing Address 4 Kampman Court		M M / D D / Y Y Y Y Y 1 D D / Y 2 0 0 7
City	State Zip Code	Transaction ID: 14653942
<u>Sparks</u>	MD 21152-9423	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	800.00
Name of Employer Maryland Hospital Associa- tion	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial) Mr. Paul A. Sokolowski		Date of Receipt
Mailing Address 12891 Eagles View R	oad	10 15 2007
City	State Zip Code	Transaction ID: 14653943
Phoenix	MD 21131-2312	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Maryland Hospital Associa- tion	Occupation Sr. Vice President, Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
		2000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 30 / 156 (check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may n the name and addre	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Vahe A. Kazandjian			Date of Receipt
Mailing Address 8392 Sweet Cherry I	_ane		10 15 2007
City	State	Zip Code	Transaction ID: 14653944
Laurel	MD	20723-1062	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		600.00
Name of Employer Maryland Hospital Associa-	Occupation		
tion Receipt For:		esident, Research	\dashv
Primary General	Aggregate Y	ear-to-Date ▼	7
Other (specify) ▼		600.00	
Full Name (Last, First, Middle Initial) Ms. Joyce Eierman			Date of Receipt
Mailing Address 6820 Deerpath Road	d		10 15 2007
City	State	Zip Code	Transaction ID: 14653945
Elkridge	MD	21075-6200	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Maryland Hospital Associa- tion	Occupation Assistant V	/ice President	
Receipt For:	Aggregate Y	ear-to-Date ▼	
Primary General Other (specify) ▼	0 0 0	250.00]
Full Name (Last, First, Middle Initial) Ms. Nancy M. Fiedler			Date of Receipt
Mailing Address 3619 Stansbury Mill	Road		10 15 2007
City	State	Zip Code	Transaction ID: 14653946
Phoenix	MD	21131-1730	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		600.00
Name of Employer Maryland Hospital Associa- tion	Occupation Sr. VP Cor	nmunications	
Receipt For:		ear-to-Date V	
Primary General Other (specify) ▼		600.00	

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(for each category of the Detailed Summary Page	
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any name and address of any political commi	person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
	American Hospital Association PAC		
١.	Full Name (Last, First, Middle Initial) Ms. Rhonda Anderson Mailing Address 900 Caton Avenue		Date of Receipt
	City	State Zip Code	1 0 1 5 2 0 0 7 Transaction ID: 14653947
	Baltimore	MD 21229-5299	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer St. Agnes HealthCare	Occupation Chief Financial Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.0	00 "
- s.	Full Name (Last, First, Middle Initial) Ms. Pegeen Townsend		Date of Receipt
	Mailing Address 225 Nckeon Road		10 15 2007
	City	State Zip Code	Transaction ID: 14653948
	Severna Park FEC ID number of contributing federal political committee.	MD 21146	Amount of Each Receipt this Period 600.00
	Name of Employer Maryland Hospital Associa- tion	Occupation Sr. Vice President, Legislative P	Policy
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.0	00
. –	Full Name (Last, First, Middle Initial) Mr. David P. Foley		Date of Receipt
	Mailing Address 6820 Deerpath Road		10 15 2007
	City Elkridge	State Zip Code MD 21075-6200	Transaction ID: 14653949 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Maryland Hospital Associa- tion	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.0	00
Γ,	SURTOTAL of Receipts This Page (ontional)	I	1350.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for comm	nercial purposes, other than using the	tatements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	OF COMMITTEE (In Full) can Hospital Association PAC			
Mr. Step	ne (Last, First, Middle Initial) hen M Erixon			Date of Receipt
	Address 220 Windy Ridge	0	7: 0 1	10 15 2007
City Holliste	er	State MO	Zip Code 65672-5725	Transaction ID: 14653954 Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C		42.00
Center	f Employer Community Health	Occupation Chief Exe	n ecutive Officer	
	For: imary General ther (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	
Ms Nand	•			Date of Receipt
Mailing /	Address P O Box 250			10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 14653956
	all number of contributing political committee.	MO C	65340-0250	Amount of Each Receipt this Period 275.00
Name of Fitzgibb	f Employer on Hospital	Occupation	n ancial Officer	
	For: imary General ther (specify) ▼		Year-to-Date ▼ 275.00	
	ne (Last, First, Middle Initial) ren K Spellman			Date of Receipt
Mailing /	Address P O Box DD			10 12 2007
City		State	Zip Code	Transaction ID: 14653957
	number of contributing political committee.	C	87571-6284	Amount of Each Receipt this Period 500.00
Name of Holy Cre	f Employer oss Hospital	Occupation Chief Exe	n ecutive Officer	
	For: imary General ther (specify) ▼		Year-to-Date ▼ 500.00	
SUBTOT#	AL of Receipts This Page (optional)			817.00

CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
for commercial purposes, other than using the	Statements may not be sold or used by any per- ne name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Paul Herzog		Date of Receipt
Mailing Address 601 Martin Luther Kir		10 12 2007
City Albuquerque	State Zip Code NM 87102-3670	Transaction ID: 14653963 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Memorial Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Joseph A. Valdez		Date of Receipt
Mailing Address 455 St. Michael's Driv	ve 	10 12 2007
City	State Zip Code	Transaction ID: 14653966
Santa Fe FEC ID number of contributing federal political committee.	NM 87505-7663	Amount of Each Receipt this Period 290.00
Name of Employer St. Vincent Regional Medi- cal Center	Occupation Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 290.00	
Full Name (Last, First, Middle Initial) Mr. Stephen J Campbell	.1	Date of Receipt
Mailing Address P O Box 489		10 12 2007
City	State Zip Code	Transaction ID: 14653969
Clayton FEC ID number of contributing federal political committee.	NM 88415-0489	Amount of Each Receipt this Period 250.00
Name of Employer Union County General Hosp- ital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		840.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Hollie Harris Mailing Address 1220 Harrodsburg Roa City Lexington FEC ID number of contributing federal political committee. Name of Employer Appalachian Regional Healthcare Receipt For:	State Zip Code KY 40504-2739 C Occupation Director of Planning Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Tony E. Welch Mailing Address 112 Deerfield Hills Ro City Elizabethtown	State Zip Code KY 42701-6974	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Hardin Memorial Hospital Receipt For: Primary General Other (specify)	Occupation Vice President, Human Resources Aggregate Year-to-Date 300.00	300.00
Full Name (Last, First, Middle Initial) Mr. James D. Jackson Mailing Address Post Office Box 668 City Prestonsburg	State Zip Code KY 41653-0668	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Highlands Regional Medical Center Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Chief Information Officer Aggregate Year-to-Date 300.00	300.00
SUBTOTAL of Receipts This Page (optional)		1200.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 156 (check only one) X
or f	vinformation copied from such Reports and St or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms. Karen A Weller Mailing Address 189 Prouty Drive City Newport FEC ID number of contributing federal political committee. Name of Employer North Country Hospital and Health Cent Receipt For: Primary General Other (specify)	State Zip Code VT 05855-9820 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / 2007 Transaction ID: 14653988 Amount of Each Receipt this Period 250.00
3.	Full Name (Last, First, Middle Initial) Mr. Thomas W Huebner Mailing Address 160 Allen Street City Rutland FEC ID number of contributing federal political committee.	State Zip Code VT 05701-4560 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Rutland Regional Medical Center Receipt For: Primary General Other (specify)	President and Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	
•	Mr. Dennis W. Chalke Mailing Address 80 Jonquil Lane City Longmeadow FEC ID number of contributing federal political committee. Name of Employer	State Zip Code MA 01106-2240 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 2 2 2 2 0 0 7 Transaction ID: 14659208 Amount of Each Receipt this Period 250.00
	Name of Employer Baystate Medical Center Receipt For: Primary General Other (specify)	Vice President, Finance Aggregate Year-to-Date ▼ 250.00	
SL	JBTOTAL of Receipts This Page (optional)		750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may not be sold or used by any personame and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Mr. Stephen L Abbott Mailing Address 88 Lewis Bay Road		Date of Receipt
		Ohata 7:a Oada	10 22 2007
	City <u>Hyannis</u>	State Zip Code MA 02601-5210	Transaction ID: 14659209 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Cape Cod Healthcare, Inc.	Occupation President and Chief Executive Office	er _
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
- s.	Full Name (Last, First, Middle Initial) Mr. Richard C. Bane	I	Date of Receipt
	Mailing Address 41 Arthur Avenue		10 22 2007
	City	State Zip Code	Transaction ID: 14659210
	Marblehead FEC ID number of contributing federal political committee.	MA 01945-1107	Amount of Each Receipt this Period 250.00
	Name of Employer North Shore Medical Center	Occupation Trustee	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. Steven F Bradley		Date of Receipt
	Mailing Address 759 Chestnut Street		10 22 2007
	City	State Zip Code	Transaction ID: 14659211
	Springfield FEC ID number of contributing federal political committee.	MA 01199-0001	Amount of Each Receipt this Period 250.00
	Name of Employer Baystate Health, Inc.	Occupation Vice President Government Relation	ns
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1	750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 156 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. John A. Dresser Mailing Address One Kelly Lane		Date of Receipt
Cit.	Chata Zin Carla	10 22 2007
City Wayland	State Zip Code MA 01778-1034	Transaction ID: 14659214 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Emerson Hospital	Occupation Vice President, Development	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Sharon A. Gale, RN, MSN		Date of Receipt
Mailing Address 101 Cambridge Street 220		10 22 7 2007
City	State Zip Code MA 01803-3766	Transaction ID: 14659215
Burlington FEC ID number of contributing federal political committee.	MA 01803-3766	Amount of Each Receipt this Period 250.00
Name of Employer Massachusetts Organization of Nurse Ex	Occupation Executive Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. William P. Fleming		Date of Receipt
Mailing Address 36 Blossom Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14659216
Norwood	MA 02062-1424	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Caritas Norwood Hospital	Occupation Senior Vice President, Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 156 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and	d Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Mark L Goldstein		Date of Receipt
Mailing Address 25 Highland Avenue		10 22 2007
City	State Zip Code	Transaction ID: 14659217
Newburyport	MA 01950-3867	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Anna Jaques Hospital	Occupation Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr Stephen J Guimond	-	Date of Receipt
Mailing Address 100 Ter Heun Drive		10 22 2007
City	State Zip Code	Transaction ID: 14659218
<u>Falmouth</u>	MA 02540-2503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Falmouth Hospital	Occupation Senior Vice President and Chief Fina	and
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Leslie A. Joseph		Date of Receipt
Mailing Address 330 Mount Auburn S	Street	10 22 2007
City	State Zip Code	Transaction ID: 14659219
Cambridge	MA 02138-5502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mount Auburn Hospital	Occupation General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		750.00

TOTAL This Period (last page this line number only)

	EMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
Ar	for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Richard Kropp		Date of Receipt
	Mailing Address 46 Forest Lane City	State Zip Code	1 0 2 2 2 0 0 7 Transaction ID: 14659220
	Scituate	MA 02066-1834	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Cape Cod Hospital	Occupation Executive Director	7
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Ms Anne L Levine		Date of Receipt
	Mailing Address 44 Binney Street		10 22 2007
	City	State Zip Code	Transaction ID: 14659221
	Boston	MA 02115-6084	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Dana-Farber Cancer Instit- ute	Occupation Vice President External Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
	Full Name (Last, First, Middle Initial) Mr. Keith C. McLean-Shinaman		Date of Receipt
	Mailing Address 53n Hayes Road		10 22 7 2007
	City	State Zip Code	Transaction ID: 14659223
	Tariffville	CT 06081-9631	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Baystate Health, Inc.	Occupation Chief Financial Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
s	UBTOTAL of Receipts This Page (optional)	_	750.00

CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Patrick L Muldoon, , CHE Mailing Address 60 Hospital Boad		Date of Receipt
Mailing Address 60 Hospital Road City	State Zip Code	10 22 2007
Leominster	MA 01453-2205	Transaction ID: 14659224 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Health Alliance Hospitals	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas Mundell		Date of Receipt
Mailing Address 403 Cairn Ridge Road		10 22 2007
City	State Zip Code	Transaction ID: 14659225
East Falmouth	MA 02536-7931	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Cape Cod Hospital	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Robert G Norton, , CHE		Date of Receipt
Mailing Address 81 Highland Avenue		10 22 2007
City	State Zip Code	Transaction ID: 14659226
Salem 550 ID and the office of	MA 01970-2768	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer North Shore Medical Center	Occupation President and Chief Executive Office	er
Receipt For: Primary General	Aggregate Year-to-Date ▼	7
Other (specify)	350.00	
NIDTOTAL (D Ti: D (. i l)		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 156 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any pers the name and address of any political committee to	
Full Name (Last, First, Middle Initial) Ms. Delia O'Connor Mailing Address 25 Highland Avenue City Newburyport FEC ID number of contributing federal political committee.	State Zip Code MA 01950-3867	Date of Receipt M M
Name of Employer Anna Jaques Hospital Receipt For: Primary General Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date 550.00	
Full Name (Last, First, Middle Initial) Mr. Hank J Porten, , CHE Mailing Address 575 Beech Street		Date of Receipt M
City	State Zip Code	Transaction ID: 14659228
Holyoke	MA 01040-2223	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Holyoke Medical Center	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas C Porter		Date of Receipt
Mailing Address 88 Washington Stre	et	10 22 2007
City	State Zip Code	Transaction ID: 14659229
Taunton FEC ID number of contributing federal political committee.	MA 02780-2465	Amount of Each Receipt this Period
Name of Employer Morton Hospital and Medic- al Center	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	1	1800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 156 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Patricia Reid-Ponte		Date of Receipt
Mailing Address 23 Indian Hill Road City	State Zip Code	1 0 2 2 2 2 0 0 7 Transaction ID: 14659230
Arlington	MA 02476-7002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Dana-Farber Cancer Instit- ute	Occupation Sr. VP and CNO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Mr. Francis M Saba		Date of Receipt
Mailing Address 14 Prospect Street		10 22 2007
City	State Zip Code	Transaction ID: 14659231
Milford	MA 01757-3090	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Milford Regional Medical Center	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Michael V Sack		Date of Receipt
Mailing Address 585 Lebanon Street		M M / D D / Y Y Y Y Y Y 10 22 2007
City	State Zip Code	Transaction ID: 14659232
Melrose	MA 02176-3225	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer Hallmark Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional).		1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any perso g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Christine C Schuster		Date of Receipt
Mailing Address 133 Old Rd to Nine City	e Acre Corner State Zip Code	1 0 2 2 2 2 0 0 7 Transaction ID: 14659234
Concord	MA 01742-9120	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Emerson Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Peter Semenza Mailing Address 330 Mount Auburn	Street	Date of Receipt
		10 22 2007
City	State Zip Code	Transaction ID: 14659237
Cambridge	MA 02138-5597	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mount Auburn Hospital	Occupation Vice President Financial Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. William J. Shickolovich		Date of Receipt
Mailing Address 585 Sharpners Por	nd Road	10 22 7 2007
City	State Zip Code	Transaction ID: 14659238
North Andover	MA 01845-3335	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tufts-New England Medical Center	Occupation Chief Information Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 156 (check only one) X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	I Statements may not be sold or used by any person he name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Mark R Tolosky, , FACHE, J Mailing Address 759 Chestnut Street City Springfield	State Zip Code MA 01199-1001	Date of Receipt 10 22 2007 Transaction ID: 14659240 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Baystate Health, Inc. Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	500.00
Full Name (Last, First, Middle Initial) Mr. William P. Tringali Mailing Address 12 Delano Avenue City Kingston FEC ID number of contributing federal political committee. Name of Employer Quincy Medical Center Receipt For: Primary General Other (specify)	State Zip Code MA 02364-1628 C Occupation Director, Materials Management Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 2 2 2 2 0 0 7 Transaction ID: 14659241 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr Roger D Wiseman Mailing Address 81 Highland Avenue City Salem FEC ID number of contributing federal political committee. Name of Employer North Shore Medical Center Receipt For: Primary General Other (specify)	State Zip Code MA 01970-2714 C Occupation Senior Vice President and Chief Finance Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D 2 2 2 2 0 0 7 Transaction ID: 14659243 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	_	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any person the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Anne Severo		Date of Receipt
Mailing Address 92 Corey Street City	State Zip Code	10 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
West Roxbury	MA 02132-2330	Transaction ID: 14659244 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Caritas St. Elizabeth's Medical Center Receipt For: Primary General	Occupation Senior Accountant Aggregate Year-to-Date ▼ 250.00	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Douglas F Dean, , Jr. Mailing Address One Filliot Way		Date of Receipt
Mailing Address One Elliot Way		10 22 2007
City	State Zip Code	Transaction ID: 14659822
Manchester	NH 03103-3599	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Elliot Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Paula Minnehan		Date of Receipt
Mailing Address 283 Gallopiny Hill Ro	ad	10 DD / YYYY 22 2007
City	State Zip Code	Transaction ID: 14659824
<u>Hopkinton</u>	NH 03229-3402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer New Hampshire Hospital As- sociation	Occupation Vice President, Rural Health & Reimbl	ur
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE ITEMIZED R	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial p	oied from such Reports and Sta urposes, other than using the r IMITTEE (In Full) spital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Mr. John F Proch	First, Middle Initial) ilo 70 Butler Street			Date of Receipt
City Salem FEC ID number federal political of		State NH	Zip Code 03079-3925	1 0 2 2 2 0 0 7 Transaction ID: 14659825 Amount of Each Receipt this Period 250.00
Name of Employ Northeast Reha Hospital Receipt For: Primary Other (spe	ver bilitation General	Occupation Chief Exe	n ecutive Officer and Administr Year-to-Date 250.00	a
Mr Frank G McDo	First, Middle Initial) bugall One Medical Center Driv	ve		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lebanon FEC ID number	of contributing	State NH	Zip Code 03756-0001	Transaction ID: 14659826 Amount of Each Receipt this Period 250.00
Name of Employ Dartmouth-Hitof al Center Receipt For: Primary Other (spe	ver ncock Medic-		n sident, Government Relations Year-to-Date ▼ 250.00	_
Full Name (Last Mr. Alvin D Felga Mailing Address				Date of Receipt
City	TT Writterian Hoad	State	Zip Code	10 22 2007 Transaction ID: 14659828
Rochester		NH	03867-3297	Amount of Each Receipt this Period
FEC ID number federal political of		C		250.00
Name of Employ Frisbie Memoria	ver I Hospital I		t and Chief Executive Officer	
Receipt For: Primary Other (spe	General General ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Re	ceipts This Page (optional))	750.00
TOTAL This Perio	od (last page this line number o	nly)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 156 (check only one) X
An	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mr. James Ainsworth Mailing Address Post Office Box 967 City Louisville FEC ID number of contributing federal political committee. Name of Employer Winston Medical Center Receipt For: Primary General Other (specify)	State Zip Code MS 39339-0967 C Occupation Director, Hospital Maintenance Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D M / Y Y Y Y Y Transaction ID: 14667654 Amount of Each Receipt this Period 250.00
 3.	Full Name (Last, First, Middle Initial) Mr. Chris Anderson Mailing Address 2809 Denny Avenue City Pascagoula FEC ID number of contributing federal political committee.	State Zip Code MS 39581-5300	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Singing River Hospital System Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	
 >.	Full Name (Last, First, Middle Initial) Mr. James D. Baker Mailing Address 3516 N. River Ridge Dr City	rive State Zip Code	Date of Receipt 10 08 2007 Transaction ID: 14667660
	D'Iberville FEC ID number of contributing federal political committee.	MS 39540	Amount of Each Receipt this Period 250.00
	Name of Employer Community Health Systems	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)	•	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Sam W. Cameron Mailing Address 28 Waterford Place City Jackson FEC ID number of contributing federal political committee. Name of Employer Mississippi Hospital Association Receipt For: Primary General Other (specify)	State Zip Code MS 39211-2945 C Occupation President & Chief Executive Officer Aggregate Year-to-Date 650.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. James G Chastain, , CHE Mailing Address P O Box 157-A City Whitfield FEC ID number of contributing federal political committee. Name of Employer Mississippi State Hospital Receipt For: Primary General Other (specify)	State Zip Code MS 39193-0157 C Occupation Director Aggregate Year-to-Date 330.00	Date of Receipt M M J D D J Z 2 0 0 7 Transaction ID: 14667673 Amount of Each Receipt this Period 205.00
Full Name (Last, First, Middle Initial) Mr. John Chioco Mailing Address 1220 Jefferson Street City Laurel FEC ID number of contributing federal political committee. Name of Employer South Central Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code MS 39440-4374 C Occupation Associate Executive Director Aggregate Year-to-Date 250.00	Date of Receipt M M / D D D / Y Y Y Y Y Transaction ID: 14667674 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		605.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 1
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. C. Gerald Cotton Mailing Address 1225 N. State Street City	State Zip Code	Date of Receipt 10 08 2007 Transaction ID: 14667675
	<u>Jackson</u>	MS 39202-2064	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Mississippi Baptist Medic- al Center Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Charles L Denton Mailing Address 960 Avent Drive		Date of Receipt 1 0 0 8 2 0 0 7
	City	State Zip Code	Transaction ID: 14667677
	Grenada	MS 38901-5230	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	225.00
	Name of Employer Grenada Lake Medical Cent- er	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
_	Full Name (Last, First, Middle Initial) Mr. Mike R. Edwards		Date of Receipt
	Mailing Address Post Office Box 259		10 08 2007
	City	State Zip Code	Transaction ID: 14667681
	Morton FEC ID number of contributing	MS 39117-0259	Amount of Each Receipt this Period
	federal political committee.	C	250.00
	Name of Employer Scott Regional Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		975.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin	and Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	AC .	
Full Name (Last, First, Middle Initial) Mr. Guy Geller		Date of Receipt
Mailing Address P O Box 351 City	State Zip Code	10 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Magnolia Magnolia	MS 39652-0351	Transaction ID: 14667686 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Beacham Memorial Hospital	Occupation Administrator and Chief Executive Offi	- i
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) Mr. Lawrence Graeber		Date of Receipt
Mailing Address 124 E. Waterwood		10 08 YYYYY 2007
City	State Zip Code	Transaction ID: 14667687
Brandon	MS 39047-6527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	205.00
Name of Employer University Hospitals and Clinics, Univ	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) Mr. Jimmy Graves		Date of Receipt
Mailing Address 100 Hospital Drive		10 08 2007
City	State Zip Code	Transaction ID: 14667688
Tylertown	MS 39667-2099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	290.00
Name of Employer Walthall County General Hospital	Occupation Administrator	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	290.00	
SUBTOTAL of Receipts This Page (ontion	al)	645.00
	nber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Claude W Harbarger Mailing Address 969 Lakeland Drive City Jackson FEC ID number of contributing federal political committee. Name of Employer St. Dominic-Jackson Memorial Hospital Receipt For: Primary General Other (specify)	State Zip Code MS 39216-4699 C Occupation President Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Fred B Hood, , FACHE Mailing Address P O Box 790 City Pontotoc FEC ID number of contributing federal political committee. Name of Employer North Mississippi Medical Center-Ponto Receipt For: Primary General Other (specify)	State Zip Code MS 38863-0790 C Occupation Administrator Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D M 2007 Transaction ID: 14667695 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Jerry M Howell Mailing Address P O Box 630 City Columbia FEC ID number of contributing federal political committee. Name of Employer Marion General Hospital Receipt For:	State Zip Code MS 39429-0630 C Occupation Chief Executive Officer	Date of Receipt M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 300.00	650.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Harold Livingston Mailing Address 5001 Statesman Dr City Irving FEC ID number of contributing federal political committee. Name of Employer Merritt Hawkins & Associa-	State Zip Code TX 75063-2414 C Occupation	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
tes Receipt For: Primary General Other (specify) ▼	Regional Vice President Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Josh McNulty Mailing Address 301 Eighth Avenue S	outhwest	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14667707
<u>Magee</u>	MS 39111-3967	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Pioneer Health Services	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Kurt W Metzner		Date of Receipt
Mailing Address 1225 North State Str	eet	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14667708
Jackson	MS 39202-2064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	800.00
Name of Employer Mississippi Baptist Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	
SUBTOTAL of Receipts This Page (optional)		1550.00
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Stephen Nichols		Date of Receipt
Mailing Address P O Box 1380 City	State Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cleveland	MS 38732-1380	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	860.00
Name of Employer Bolivar Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 860.00	
Full Name (Last, First, Middle Initial) Mr. Gerald D Wages		Date of Receipt
Mailing Address 830 S. Gloster Street		10 08 YYYYY 2007
City	State Zip Code	Transaction ID: 14667799
Tupelo	MS 38801-4996	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	800.00
Name of Employer North Mississippi Health Services, Inc	Occupation Interim President and Chief Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis		Date of Receipt
Mailing Address Liberty Place, Suite 70 325 Seventh Street, N	W	10 22 7 2007
City	State Zip Code DC 20004-2802	Transaction ID: 14668361
Washington FEC ID number of contributing federal political committee.	DC 20004-2802	Amount of Each Receipt this Period 500.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Regional Executive	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		2160.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Donna M Oliver Mailing Address 1410 North Fourth Str City	eet State Zip Code	Date of Receipt 1 0 2 5 2 0 0 7 Transaction ID: 14668381
Clinton FEC ID number of contributing federal political committee.	IA 52732-2940	Amount of Each Receipt this Period 250.00
Name of Employer Mercy Medical Center-Clinton Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President and Chief Executive Office Aggregate Year-to-Date 250.00	<u>r</u>
Full Name (Last, First, Middle Initial) Mr. John C Sheehan Mailing Address P O Box 3026		Date of Receipt 1 0 2 5 2 0 0 7
City	State Zip Code	Transaction ID: 14668382
Cedar Rapids FEC ID number of contributing federal political committee.	IA 52406-3026	Amount of Each Receipt this Period 250.00
Name of Employer St. Luke's Hospital	Occupation Executive Vice President and COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Marilyn E. Kaptain-Dahlen		Date of Receipt
Mailing Address 801 15th Street Box 203		10 25 2007
City <u>Sioux City</u>	State Zip Code IA 51105-1502	Transaction ID: 14668383
FEC ID number of contributing federal political committee.	C 31103-1302	Amount of Each Receipt this Period 500.00
Name of Employer Mercy Medical Center-Sioux City	Occupation Vice President, Regionalization	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	1	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 156 (check only one) X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms Joan Bierman Mailing Address 300 Sioux Valley Drive		Date of Receipt
City	State Zip Code	1 0 2 5 2 0 0 7 Transaction ID: 14668384
Cherokee	IA 51012-1205	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Cherokee Regional Medical Center	Occupation Vice President Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Todd C Linden		Date of Receipt
Mailing Address 210 Fourth Avenue		10 25 2007
City	State Zip Code	Transaction ID: 14668445
Grinnell	IA 50112-1886	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Grinnell Regional Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Jeanne Goche		Date of Receipt
Mailing Address 410 Main Street		10 25 2007
City	State Zip Code	Transaction ID: 14668446
Manning	IA 51455-1093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Manning Regional Healthca- re Center	Occupation Chief Executive Officer and Administra	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line number of	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Jeffrey M Cooper Mailing Address 1118 11th Street City De Witt FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center, DeWitt Receipt For: Primary General Other (specify)	State Zip Code IA 52742-1235 C Occupation Vice President, DeWitt Operations Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 14668501 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Jay Christensen Mailing Address 1229 'C' Avenue East City Oskaloosa FEC ID number of contributing federal political committee. Name of Employer Mahaska Health Partnership Receipt For: Primary General Other (specify)	State Zip Code IA 52577-4246 C Occupation Administrator Aggregate Year-to-Date 265.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. James G FitzPatrick Mailing Address 1000 Fourth Street SW City Mason City FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center-North lowa Receipt For: Primary General Other (specify)	State Zip Code IA 50401-2800 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 14668503 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)		1015.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any per- name and address of any political committee	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr Douglas E Morse Mailing Address 1000 Fourth Street SV City Mason City FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center-North lowa	State Zip Code IA 50401-2800 C Occupation Senior Vice President Network and	Date of Receipt M M M / 25 / 2007 Transaction ID: 14668524 Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 500.00	
Mr Scott Leighty Mailing Address 1000 Fourth Street SV City	State Zip Code	Date of Receipt 1 0 2 5 2 0 0 7 Transaction ID: 14668526
Mason City FEC ID number of contributing federal political committee.	IA 50401-2800	Amount of Each Receipt this Period 500.00
Name of Employer Mercy Medical Center-North lowa Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Joseph LeValley	I	Date of Receipt
Mailing Address 1111 6th Avenue City	State Zip Code	10 25 2007
Des Moines	IA 50314-2611	Transaction ID: 14668528 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mercy Medical Center-Des Moines Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President Planning Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional)		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David H Vellinga, , FACHE Mailing Address 1111 6th Avenue City Des Moines FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center-Des Moines Receipt For: Primary General Other (specify)	State Zip Code IA 50314-2613 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / 25 / 2007 Transaction ID: 14668534 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Tom Tibbitts Mailing Address 802 Kenyon Road City Fort Dodge FEC ID number of contributing federal political committee. Name of Employer Trinity Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code IA 50501-5740 C Occupation CEO Aggregate Year-to-Date 250.00	Date of Receipt M M / 25 / 2007 Transaction ID: 14668535 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Mark D Richardson Mailing Address 1221 South Gear Average City West Burlington FEC ID number of contributing federal political committee. Name of Employer Great River Medical Center Receipt For: Primary General Other (specify)	State Zip Code IA 52655-1681 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / 25 / 2007 Transaction ID: 14668536 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 156 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gregory A Paris, , CHE Mailing Address 6580 165th Street City Albia FEC ID number of contributing federal political committee. Name of Employer Monroe County Hospital Receipt For: Primary General Other (specify)	State Zip Code IA 52531-8793 C Occupation Chief Executive Officer Aggregate Year-to-Date 502.50	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. John M Comstock Mailing Address 300 Sioux Valley Drive City Cherokee FEC ID number of contributing federal political committee. Name of Employer Cherokee Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code IA 51012-1205 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Barry G. Goettsch Mailing Address 300 Sioux Valley Drive City Cherokee FEC ID number of contributing federal political committee. Name of Employer Cherokee Regional Medical	State Zip Code IA 51012-1205 C Occupation	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Center Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Senior Vice President, Operations Aggregate Year-to-Date ▼ 250.00	1002.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC Full Name (Last, First, Middle Initial)		Patrick Branch
Α.	Mr. C James Platt Mailing Address P O Box 174		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Fort Madison	State Zip Code IA 52627-0174	Transaction ID: 14668564 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Fort Madison Community Ho- spital Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	
В.	Full Name (Last, First, Middle Initial) Mr Clarence Brewton Mailing Address 1833 Foxwood Circle		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 14669399
	Mitchellville	MD 20721-4139	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer MedStar Health	Occupation Vice President Regulatory Compliance	e,
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
с. С.	Full Name (Last, First, Middle Initial) Mr. Stanley R Korducki		Date of Receipt
.	Mailing Address 950 West Wooster Str	eet	10 D D C 22 2 2 0 0 7
	City Bowling Green	State Zip Code OH 43402-2603	Transaction ID: 14670054
	FEC ID number of contributing federal political committee.	C 43402-2003	Amount of Each Receipt this Period 500.00
	Name of Employer Wood County Hospital	Occupation President	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼	
	SUBTOTAL of Receipts This Page (optional)	······	1750.00
Ī	TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Kevin C Martin		Date of Receipt
Mailing Address 630 East River Street		10 22 7 2007
City	State Zip Code	Transaction ID: 14670055
Elyria	OH 44035-5902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer EMH Regional Medical Cent- er	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Lyndon J Christman		Date of Receipt
Mailing Address 203 Bryn Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14670056
Granville	OH 43023-1503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	275.00
Name of Employer Fayette County Memorial Hospital	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	275.00	
Full Name (Last, First, Middle Initial) Mr. George Massar		Date of Receipt
Mailing Address 820 Abingdon Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14670057
Bowling Green	OH 43402-8517	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Wood County Hospital	Occupation Vice President, Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		875.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Ma	ull Name (Last, First, Middle Initial) r. Robert W Shroder ailing Address 667 Eastland Avenue S		7:n Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	/arren	State OH	Zip Code 44484-4503	Transaction ID: 14670058 Amount of Each Receipt this Period
fed	EC ID number of contributing deral political committee.	C		250.00
_	eceipt For: Primary Other (specify)		t and Chief Executive Officer Year-to-Date 250.00	
Mı	ull Name (Last, First, Middle Initial) r. R. Reed Fraley ailing Address 257 Clouse Lane			Date of Receipt 1 0 2 2 2 2 0 0 7
Ci	ty	State	Zip Code	Transaction ID: 14670073
<u>G</u>	ranville	ОН	43023-1428	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		125.00
Na Ol	ame of Employer hio Hospital Association	Occupation Senior V	n ice President	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 625.00	
Mı	ull Name (Last, First, Middle Initial) r. David L Gray ailing Address 913 North Dixie Avenu	e		Date of Receipt
 Ci	tv	State	Zip Code	1 0 2 2 2 0 0 7 Transaction ID: 14671534
	lizabethtown	KY	42701-2599	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		500.00
	ame of Employer ardin Memorial Hospital	Occupation Presiden		
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUB	TOTAL of Receipts This Page (optional)			875.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personant and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Milton Brooks		Date of Receipt
Mailing Address 850 Riverview Avenue		10 22 7 2007
City	State Zip Code	Transaction ID: 14671535
Pineville	KY 40977-1430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Pineville Community Hospi- tal Associati	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Fred L Jackson, , FACHE	1	Date of Receipt
Mailing Address P O Box 151		10 22 7 2007
City	State Zip Code	Transaction ID: 14671735
Ashland	KY 41105-0151	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer King's Daughters Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)		Date of Descript
Mr. Frank A. Butler Mailing Address 437 Adair Road		Date of Receipt 1 0 2 2 2 2 0 0 7
City	State Zip Code	Transaction ID: 14672114
Lexington	KY 40536-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University of Kentucky Ho- spital	Occupation Vice President/Medical Center Opera	tiq
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 156 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Dennis B Johnson Mailing Address 1025 New Moody Lane City La Grange FEC ID number of contributing federal political committee. Name of Employer Baptist Hospital Northeast Receipt For: Primary General Other (specify)	State Zip Code KY 40031-9154 C Occupation Administrator Aggregate Year-to-Date 500.00	Date of Receipt M M M / 22 / 2007 Transaction ID: 14672116 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Ms. Connie Smith Mailing Address P O Box 90010 City Bowling Green FEC ID number of contributing federal political committee. Name of Employer Medical Center at Bowling Green, The Receipt For: Primary General Other (specify)	State Zip Code KY 42102-9010 C Occupation Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mrs. Susan Stout Tamme, , FACHE Mailing Address 4000 Kresge Way City Louisville FEC ID number of contributing federal political committee. Name of Employer Baptist Hospital East Receipt For: Primary General Other (specify)	State Zip Code KY 40207-4605 C Occupation President Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 156 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persidence to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Ms. Joanna G. Thomas			Date of Receipt
Mailing Address 162 Talbott Drive			10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bowling Green	State KY	Zip Code 42103-1322	Transaction ID: 14672675 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Southern Kentucky Rehabi- litation Hosp Receipt For: Primary General Other (specify) ▼		ecutive Officer e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Charles Black			Date of Receipt
Mailing Address P O Box 1310			10 22 7 2007
City	State	Zip Code	Transaction ID: 14672690
Mount Vernon FEC ID number of contributing federal political committee.	C	40456-1310	Amount of Each Receipt this Period 500.00
Name of Employer Rockcastle Hospital and Respiratory Ca	Occupatio Chief Fir	n nancial Officer	
Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Stephen A Estes			Date of Receipt
Mailing Address P O Box 1310			10 22 2007
City Mount Vernon	State KY	Zip Code	Transaction ID: 14672691
FEC ID number of contributing federal political committee.	C	40456-1310	Amount of Each Receipt this Period 500.00
Name of Employer Rockcastle Hospital and Respiratory Ca	- + +	ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 156 (check only one) X 11a
any information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Richard Laib		Date of Receipt
Mailing Address 1236 Thistledown Cou		10 22 7 2007
City	State Zip Code	Transaction ID: 14672705
Hebron	KY 41048-8438	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Luke Hospital West	Occupation Trustee	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)		Date of Resolut
Mr. Stephen L Meredith Mailing Address 910 Wallace Avenue		Date of Receipt 1 0 2 2 2 0 0 7
City	State Zip Code	Transaction ID: 14672706
Leitchfield	KY 42754-2414	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Twin Lakes Regional Medic- al Center	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Chris Carle		Date of Receipt
Mailing Address 238 Barnes Road		10 22 2007
City	State Zip Code	Transaction ID: 14673943
Williamstown	KY 41097-9460	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Elizabeth Medical Cen- ter-Grant Cou	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		1000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Heather Cote Mailing Address 2830 Shoemaker Drive City Louisville FEC ID number of contributing federal political committee. Name of Employer Norton Suburban Hospital	State Zip Code KY 40241-6501 C Occupation VP/Patient Care Services	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 250.00	
Mr Joseph DeVenuto Mailing Address 4001 Dutchmans Lane		Date of Receipt M M D D Y Y Y Y Y Y Y
City Louisville	State Zip Code KY 40207-4714	Transaction ID: 14673946
FEC ID number of contributing federal political committee.	KY 40207-4714	Amount of Each Receipt this Period 250.00
Name of Employer Norton Suburban Hospital	Occupation Assistant Vice President/CIO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Douglas J. Eighmey	l	Date of Receipt
Mailing Address 4120 Lilac Vista Drive		10 22 7 2007
City	State Zip Code	Transaction ID: 14673954
Louisville FEC ID number of contributing federal political committee.	KY 40241-4198	Amount of Each Receipt this Period 250.00
Name of Employer Kosair Children's Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	1	625.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate scher for each category o Detailed Summary	f the
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by aname and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Thomas D Kmetz		Date of Receipt
Mailing Address 9820 Third Street Roa	d	1 0 2 2 2 2 0 0 7
City	State Zip Code	Transaction ID: 14673956
Louisville	KY 40272-2802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Norton Southwest Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	00.00
Full Name (Last, First, Middle Initial) Mr. J. Michael Horsley		Date of Receipt
Mailing Address 8107 Henslow Court		10 29 2007
City	State Zip Code	Transaction ID: 14674360
Montgomery	AL 36117-7475	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Alabama Hospital Associat- ion	Occupation President and Chief Executive	ve Officer
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼	00.00
Full Name (Last, First, Middle Initial) Mr. J. Frazer Rolen, Jr.		Date of Receipt
Mailing Address 2204 Lakeshore Drive Suite 230		10 29 2007
City	State Zip Code	Transaction ID: 14674361
Birmingham	AL 35209-6729	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Alabama Hospital Associat- ion	Occupation Sr. VP & Director, Federal A	dvocacy
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	00.00
SUBTOTAL of Receipts This Page (optional) .		2500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Danne J. Howard Mailing Address 1812 Woodmere Loop City Montgomery FEC ID number of contributing federal political committee. Name of Employer Alabama Hospital Association Receipt For: Primary General	State Zip Code AL 36117-5004 C Occupation VP, State Government Relations Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 14674362 Amount of Each Receipt this Period 500.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. James Ramsey Mailing Address 530 South Jackson Str City Louisville FEC ID number of contributing	eet State Zip Code KY 40202-1675	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer University of Louisville Hospital Receipt For: Primary Other (specify)	Occupation Trustee Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Kevin S Wardell Mailing Address P O Box 35070 City	State Zip Code	Date of Receipt M
Louisville FEC ID number of contributing federal political committee.	KY 40232-5070	Amount of Each Receipt this Period 250.00
Name of Employer Norton Hospital Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE /	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 156 (check only one) X
or for commercial pu	rposes, other than using the n	atements may no name and addres	t be sold or used by any perso s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ms. Tracy E Willia	First, Middle Initial) ns 234 East Gray Street, S	Ste. 225		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Louisville		State KY	Zip Code 40202-1913	Transaction ID: 14674853 Amount of Each Receipt this Period
FEC ID number of federal political co		C	40202 1010	250.00
Name of Employer Norton Healthcar Receipt For:	er e	Occupation Senior Vice Aggregate Ye		
Primary Other (spec	General	Aggregate re	250.00	
Full Name (Last, Mr. Mark M Gordo Mailing Address				Date of Receipt
City		State	Zip Code	1 0 2 2 2 0 0 7 Transaction ID: 14674856
Ashland FEC ID number of federal political co		C	41105-0789	Amount of Each Receipt this Period 320.00
Name of Employe Our Lady of Belle spital	er fonte Ho-	Occupation Chief Execu		
Receipt For: Primary Other (spec	General	Aggregate Ye	ar-to-Date ▼ 320.00	
Full Name (Last, Mr. Donald R Field	First, Middle Initial)			Date of Receipt
Mailing Address	100 Medical Center Driv	/e		10 22 2007
City		State	Zip Code	Transaction ID: 14674874
Hazard FEC ID number of federal political controls.		C	41701-9421	Amount of Each Receipt this Period 500.00
Name of Employe Hazard ARH Rec al Center	er ional Medic-	•	munity Chief Executive C	Dffic
Receipt For: Primary Other (spec	General	Aggregate Ye	ar-to-Date ▼ 500.00]
SUBTOTAL of Rec	eipts This Page (optional)		\	1070.00

SCHEDULE A (FEC		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 156 (check only one) X 11a
or for commercial purposes, of	her than using the name and	may not be sold or used by any pers address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (II American Hospital Asse	*		
Full Name (Last, First, Midd			Date of Receipt
Mailing Address P O Bo			10 22 2007
City Lexington	State KY	Zip Code 40533-8086	Transaction ID: 14674875 Amount of Each Receipt this Period
FEC ID number of contribut federal political committee.	ing C		500.00
Name of Employer Appalachian Regional Heal- thcare	Occup. Presid	ation dent and Chief Executive Office	er
Receipt For: Primary Ger Other (specify) ▼	Aggreç	gate Year-to-Date ▼ 500.00	
Full Name (Last, First, Mido Dr J.D. Miller, , M.D.	fle Initial)		Date of Receipt
Mailing Address PO Bo	ox 579		M M / D D / Y Y Y Y 1 1 0 2 2 2 2 0 0 7
City	State	•	Transaction ID: 14674876
West Liberty FEC ID number of contribut federal political committee.	KY C	41472-0579	Amount of Each Receipt this Period
Name of Employer Morgan County Appalachia Regional Hos	n Occup	ation Medical Officer	
Receipt For:	Aggreç neral	gate Year-to-Date ▼ 250.00	
Full Name (Last, First, Midd Mr. Jack G. Blackwell	fle Initial)		Date of Receipt
Mailing Address 520 24t	h Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	'	Transaction ID: 14674884
Ashland FEC ID number of contribut federal political committee.	KY C	41101-2904	Amount of Each Receipt this Period 300.00
Name of Employer Highlands Regional Medica Center	Occup. Chief	ation Financial Officer	
Receipt For:	Aggree	gate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This	Para (saliara)		925.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 156 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may no name and addres	ot be sold or used by any perso ss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard Crest Bl	vd.		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City Manasquan	State NJ	Zip Code 08736-4001	Transaction ID: 14674895 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	,	nation Officer ear-to-Date ▼ 225.00	
3.	Full Name (Last, First, Middle Initial) Mr. Gary S. Carter, FACHE Mailing Address 35 DeHart Drive	l		Date of Receipt 1 0 2 6 2 0 0 7
	City	State	Zip Code	Transaction ID: 14674896
	Belle Mead FEC ID number of contributing federal political committee.	C	08502-5419	Amount of Each Receipt this Period 500.00
	Name of Employer New Jersey Hospital Assoc- iation	1	Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper			Date of Receipt
	Mailing Address 121 Clear Creek Road			10 26 YYYYY 10 26 2007
	City	State	Zip Code	Transaction ID: 14674901
	Langhorne FEC ID number of contributing federal political committee.	C	19047-2306	Amount of Each Receipt this Period 135.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President	ent, Human Resources	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 225.00	
[SUBTOTAL of Receipts This Page (optional)	1		650.00

	LE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
or for comme	cial purposes, other than using the COMMITTEE (In Full)	tatements may name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
America	n Hospital Association PAC			
Mr. John J.	(Last, First, Middle Initial) Dawidowski			Date of Receipt
Mailing Ad	dress 17 Brookshire Drive	01-1-	7's Oads	10 26 2007
City <u>Robbins</u>	ville	State NJ	Zip Code 08691-2554	Transaction ID: 14674906 Amount of Each Receipt this Period
	umber of contributing itical committee.	C		15.00
Name of E New Jerse iation	mployer by Hospital Assoc-	Occupation Vice Pres	n sident & General Manager	
Receipt Fo		Aggregate	Year-to-Date ▼ 225.00	
Ms. Theres	(Last, First, Middle Initial) a L. Edelstein			Date of Receipt
Mailing Ad	dress 27 Harvest Lane			10 26 7 2007
City	_	State	Zip Code	Transaction ID: 14674910
	inber of contributing itical committee.	NJ C	07039-2750	Amount of Each Receipt this Period 35.00
Name of E New Jerse iation	mployer ey Hospital Assoc-	Occupation Vice Pres	n sident Continuing Care Serv	rice
Receipt For Prim Other		Aggregate	Year-to-Date ▼ 205.00	
Full Name Mr. Guy P.	(Last, First, Middle Initial) Evans			Date of Receipt
Mailing Ad	dress 41 Manitto Place			10 26 2007
City Oceanpo	. w+	State NJ	Zip Code 07757-1510	Transaction ID: 14674911
FEC ID nu	imber of contributing itical committee.	C	07737-1310	Amount of Each Receipt this Period 135.00
Name of E New Jerse iation	mployer ey Hospital Assoc-	Occupation Vice Pres		
Receipt For Prim Other		Aggregate	Year-to-Date ▼ 225.00	
SUBTOTAL	of Receipts This Page (optional)	<u> </u>		185.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 156 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain City New Hope FEC ID number of contributing federal political committee.	Road State Zip Code PA 18938-5760	Date of Receipt M M Z 6 Z 0 0 7 Transaction ID: 14674920 Amount of Each Receipt this Period 55.83
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼ 309.17	
Full Name (Last, First, Middle Initial) Mr. William D. Kennedy Mailing Address 1549 North Valley Ro	ad	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14674925
<u>Malvern</u>	PA 19355-9796	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer New Jersey Hospital Assoc-	Occupation Senior Vice President	
iation Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Mr. John K Lloyd		Date of Receipt
Mailing Address 1350 Campus Parkwa	ay	M M / D D / Y Y Y Y Y Y 1 1 0 2 6 2 0 0 7
City Wall Township	State Zip Code NJ 07753-6821	Transaction ID: 14674931
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer Meridian Health	Occupation President and Chief Executive Office	per
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	1	930.83

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75/156 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>		
Full Name (Last, First, Middle Initial) Mr. John P McGee			Date of Receipt
Mailing Address 80 James Street, 2	2nd Floor		M M / D D / Y Y Y Y Y 1 Y 1 1 0 2 6 2 0 0 7
City Edison	State NJ	Zip Code 08820-3938	Transaction ID: 14674933
FEC ID number of contributing federal political committee.	C	00020-3930	Amount of Each Receipt this Period 500.00
Name of Employer Solaris Health System	Occupation Presiden	n t and Chief Executive Office	-
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Ostaszewski			Date of Receipt
Mailing Address 14 Hospital Drive			10 26 2007
City Toms River	State NJ	Zip Code 08755-6402	Transaction ID: 14674940
FEC ID number of contributing federal political committee.	C	00733-0402	Amount of Each Receipt this Period 400.00
Name of Employer HEALTHSOUTH Rehabilitation Hospital of	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General		e Year-to-Date ▼	
Other (specify)		400.00	
Full Name (Last, First, Middle Initial) Mr. Richard A. Pitman			Date of Receipt
Mailing Address 219 West Van Sal	nt Avenue		M M / D D / Y Y Y Y Y Y Y 1 1 0 2 6 2 0 0 7
City	State	Zip Code	Transaction ID: 14674943
Linwood FEC ID number of contributing	NJ	08221-1732	Amount of Each Receipt this Period
federal political committee.	C		500.00
Name of Employer Shore Memorial Hospital	Occupation Senior A	n dvisor Government	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		500.00	
	al)		1400.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 156 (check only one) X
An	y information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Mr. Harold C Warman, , Jr., FAC		Date of Receipt
	Mailing Address P O Box 668	Older 7's Older	10 22 2007
	City Prestonsburg	State Zip Code KY 41653-0668	Transaction ID: 14675141 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Highlands Regional Medical Center	Occupation President and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Russell Johnson		Date of Receipt
	Mailing Address 106 Blanca Avenue		10 22 2007
	City	State Zip Code	Transaction ID: 14675205
	Alamosa FEC ID number of contributing federal political committee.	CO 81101-2393	Amount of Each Receipt this Period 250.00
	Name of Employer San Luis Valley Regional Medical Cente	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Phil E. Matthews		Date of Receipt
	Mailing Address 419 Natural Resource	es Drive	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 14675432
	Little Rock FEC ID number of contributing federal political committee.	AR 72205-1576	Amount of Each Receipt this Period 650.00
	Name of Employer Arkansas Hospital Associa- tion	Occupation President & CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
	UBTOTAL of Receipts This Page (optional)		1400.00

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for c	ormation copied from such Reports and Stommercial purposes, other than using the ME OF COMMITTEE (In Full) erican Hospital Association PAC	tatements may name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. l	Name (Last, First, Middle Initial) Bo Ryall ing Address 419 Natural Resources	Drive		Date of Receipt
City	le Rock	State	Zip Code 72205-1576	1 0 2 2 2 0 0 7 Transaction ID: 14675433 Amount of Each Property this Period
FEC	CID number of contributing ral political committee.	C	72203-1370	Amount of Each Receipt this Period 650.00
<u>tion</u>	ne of Employer ansas Hospital Associa- eipt For: Primary General Other (specify)		e Vice President Year-to-Date 650.00	
<u>Mr.</u>	Name (Last, First, Middle Initial) Ted Woddrell ing Address P.O. Box 17006			Date of Receipt 10 22 2007
City		State	Zip Code	Transaction ID: 14675434
<u>For</u>	t Smith	AR	72917-7006	Amount of Each Receipt this Period
	CID number of contributing ral political committee.	C		390.00
Spa <u>Ce</u> n			ecutive Officer	
Rec	eipt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 390.00]
	Name (Last, First, Middle Initial) William L. Bradley			Date of Receipt
Mail	ing Address 3215 North Hills Boulev	vard		10 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 14675435
	<u>retteville</u>	AR	72703-4007	Amount of Each Receipt this Period
	CID number of contributing eral political committee.	С		341.25
<u>al C</u>	ne of Employer shington Regional Medic- enter		t & Chief Executive Officer	
Hec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 341.25	
SUBT	OTAL of Receipts This Page (optional)			1381.25

CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and for commercial purposes, other than using th	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Don Adams		Date of Receipt
Mailing Address 419 Natural Resource		10 22 7 2007
City Little Rock	State Zip Code AR 72205-1576	Transaction ID: 14675436 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Arkansas Hospital Associa- tion	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Roger M. Busfield Mailing Address 419 Natural Resource	a Dr	Date of Receipt
		10 22 2007
City Little Rock	State Zip Code AR 72205-1576	Transaction ID: 14675442
FEC ID number of contributing federal political committee.	AR 72205-1576	Amount of Each Receipt this Period 325.00
Name of Employer Arkansas Hospital Associa- tion	Occupation President Emeritus	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. David Cicero		Date of Receipt
Mailing Address P O Box 797		10 22 YYYYY 10 22 2007
City	State Zip Code	Transaction ID: 14675443
Camden FEC ID number of contributing federal political committee.	AR 71701-0797	Amount of Each Receipt this Period 325.00
Name of Employer Ouachita Medical Center	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (optional).		975.00

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Penny Clain Mailing Address 205 East Jefferson St City Siloam Springs	Statements may not be sold or used by any persor e name and address of any political committee to see the state of the sta	Date of Receipt Date of Receipt 2 0 0 7 1 0 2 2 2 0 0 7
Ms. Penny Clain Mailing Address 205 East Jefferson St City	State Zip Code	M M / D D / Y Y Y Y Y 1 1 0 2 2 2 2 0 0 7
	·	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 325.00
Name of Employer Siloam Springs Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 325.00	
Full Name (Last, First, Middle Initial) Ms. Tina Creel Mailing Address 419 Natural Resource	es Drive	Date of Receipt
City	State Zip Code	Transaction ID: 14675445
Little Rock	AR 72205-1576	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Arkansas Hospital Associa- tion	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Paul Cunningham		Date of Receipt
Mailing Address 419 Natural Resource	es Drive	10 22 2007
City	State Zip Code	Transaction ID: 14675446
Little Rock	AR 72205-1576	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Arkansas Hospital Associa- tion	Occupation Senior Vice President]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (optional) .	····	975.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 11
An	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any perso name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<u>∠_</u> A.	Full Name (Last, First, Middle Initial) Mr. Dean Davenport Mailing Address Post Office Box 3667 City	State Zip Code	Date of Receipt 10 22 2007 Transaction ID: 14675464
	Little Rock FEC ID number of contributing federal political committee.	AR 72203-3667	Amount of Each Receipt this Period 325.00
	Name of Employer BKD, LLP Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Partner Aggregate Year-to-Date 325.00	
3.	Full Name (Last, First, Middle Initial) Mr. John A. Guest Mailing Address 1311 South 'I' Street		Date of Receipt 10 22 2007
	City Fort Smith FEC ID number of contributing federal political committee.	State Zip Code AR 72901-4915 C	Transaction ID: 14675465 Amount of Each Receipt this Period 325.00
	Name of Employer Sparks Regional Medical Center Receipt For: Primary General Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date 325.00	
	Full Name (Last, First, Middle Initial) Mr. Russell D Harrington, , Jr. Mailing Address 9601 Interstate 630, Ex	iit 7	Date of Receipt 10 22 2007
	City Little Rock	State Zip Code AR 72205-7202	Transaction ID: 14675466 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Baptist Health	Occupation	325.00
	Receipt For: Primary Other (specify) ▼	President and Chief Executive Officer Aggregate Year-to-Date ▼ 325.00	
SI	JBTOTAL of Receipts This Page (optional)	•	975.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 156 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Michael D. Helm Mailing Address Post Office Box 1700 City Fort Smith	6 State Zip Code AR 72917-7006	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Sparks Regional Medical Center Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 325.00	325.00
Full Name (Last, First, Middle Initial) Mr. Timothy E Hill Mailing Address 620 North Willow Stree City Harrison FEC ID number of contributing federal political committee. Name of Employer North Arkansas Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code AR 72601-2994 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 325.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 14675468 Amount of Each Receipt this Period 325.00
Full Name (Last, First, Middle Initial) Ms. Beth Ingram Mailing Address 419 Natural Resource City Little Rock FEC ID number of contributing federal political committee. Name of Employer Arkansas Hospital Association	State Zip Code AR 72205-1576 C Occupation Vice President	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 2 2 2 2 0 0 7 Transaction ID: 14676036 Amount of Each Receipt this Period 325.00
Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 325.00	975.00

	LE A (FEC Form 3X) O RECEIPTS	Use separate s for each catego Detailed Summ	schedule(s) ory of the	FOR LINE NUMBER: PAGE 82 / 156 (check only one) X
or for commerce	n copied from such Reports and Sta cial purposes, other than using the n COMMITTEE (In Full) Hospital Association PAC	tements may not be sold or us ame and address of any politic	ed by any person f al committee to so	or the purpose of soliciting contributions licit contributions from such committee.
Mr. Luther J Mailing Add City EI Doradd FEC ID nur federal polit Name of Er Medical Ce Arkansas Receipt For	mber of contributing tical committee. mployer anter of South	State Zip Code AR 71731-1998 C Occupation Chief Executive Officer Aggregate Year-to-Date	325.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Mr. Raymon	(Last, First, Middle Initial) Id W Montgomery, II, FACHE dress 3214 East Race Avenue	State Zip Code AR 72143-4810		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID nur federal politi Name of Er White Cour er Receipt For	nty Medical Cent-	Occupation President and Chief Exe Aggregate Year-to-Date	cutive Officer	Amount of Each Receipt this Period 325.00
Full Name of Mr. John Community Mailing Add		149		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	all mber of contributing tical committee.	State Zip Code MS 39114-3438		Transaction ID: 14676039 Amount of Each Receipt this Period 325.00
Name of Er Simpson G	mployer eneral Hospital	Occupation Chief Executive Officer		
Receipt For Prima		Aggregate Year-to-Date ▼	325.00	
SUBTOTAL (of Receipts This Page (optional)			975.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Scott Peek Mailing Address 3504 Swiss Avenue City Dallas FEC ID number of contributing federal political committee. Name of Employer Our Children's House at Baylor Receipt For:	State Zip Code TX 75204-6224 C Occupation President Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Ron Peterson Mailing Address 624 Hospital Drive	325.00	Date of Receipt
City Mountain Home FEC ID number of contributing federal political committee. Name of Employer Baxter Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code AR 72653-2955 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 325.00	1 0 2 2 2 0 0 7 Transaction ID: 14676043 Amount of Each Receipt this Period 325.00
Full Name (Last, First, Middle Initial) Mr. Ronald K Rooney, , FACHE Mailing Address P O Box 339 City Paragould FEC ID number of contributing federal political committee. Name of Employer Arkansas Methodist Medical Center Receipt For:	State Zip Code AR 72451-0339 C Occupation President Aggregate Year-to-Date ▼	Date of Receipt M M / D 2 2 2 2 0 0 7 Transaction ID: 14676044 Amount of Each Receipt this Period 325.00
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	325.00	975.00

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 156 (check only one) X
or for c	ormation copied from such Reports and St ommercial purposes, other than using the ME OF COMMITTEE (In Full) erican Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. Dr. 9 Mail City El [Name (Last, First, Middle Initial) Stephen Smart, DDS ing Address 318 Thompson Dorado C ID number of contributing eral political committee.	State AR	Zip Code 71730-4569	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 2 2 2 2 0 0 7 Transaction ID: 14676045 Amount of Each Receipt this Period 325.00
<u>Arka</u>	ne of Employer dical Center of South ansas eipt For: Primary General Other (specify)	Occupatio Chairma Aggregate		
B. Ms.	Name (Last, First, Middle Initial) Elisa White ing Address 419 Natural Resources	Drive		Date of Receipt 10 22 2007
FEC	le Rock CID number of contributing eral political committee.	State AR	Zip Code 72205-1576	Transaction ID: 14676046 Amount of Each Receipt this Period 325.00
Arka <u>tion</u>	ne of Employer ansas Hospital Associa- eipt For: Primary General Other (specify)	11.00	n sident & General Counsel e Year-to-Date ▼ 325.00	
Ms.	Name (Last, First, Middle Initial) Mary L. Gallagher ing Address 155 East Broad Street, 15th Floor			Date of Receipt 10 22 2007
FEC	umbus CID number of contributing	State OH	Zip Code 43215-3609	Transaction ID: 14676133 Amount of Each Receipt this Period 250.00
	oral political committee. ne of Employer o Hospital Association	Occupatio	n sident & General Counsel	
Rec	eipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
SUBT	OTAL of Receipts This Page (optional)		·······	900.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for	nformation copied from such Reports and S r commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
- I \	AME OF COMMITTEE (In Full) merican Hospital Association PAC			
. <u>M</u>	ull Name (Last, First, Middle Initial) Ir. Leo F Childers, , Jr., FAC			Date of Receipt
_	lailing Address 605 North 12th Street	01-1-	7's Oads	10 29 2007
	ity 1ount Vernon	State IL	Zip Code 62864-2899	Transaction ID: 14682376 Amount of Each Receipt this Period
FI	EC ID number of contributing deral political committee.	C	02004 2000	250.00
N: G H	ame of Employer lood Samaritan Regional ealth Center	Occupation Presiden		
	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
. <u>M</u>	ull Name (Last, First, Middle Initial) Ir. Bruce Merrell, , FACHE	1		Date of Receipt
М	ailing Address 400 North Pleasant Av	10 29 2007		
	ity	State	Zip Code	Transaction ID: 14682377
<u>C</u>	Centralia	<u> </u>	62801-3056	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		250.00
N: S	ame of Employer t. Mary's Hospital	Occupation President		
R	eceipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		750.00	
	ull Name (Last, First, Middle Initial) Ir. Brad Billings	1		Date of Receipt
M	ailing Address 722 Eagle Trace			10 29 2007
	ity	State	Zip Code	Transaction ID: 14682379
_	Quincy	<u>IL</u>	62305-6201	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		250.00
N: B	ame of Employer lessing Hospital	Occupation Administ		
R	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00	
		•		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 156 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Jeffrey Brickman		Date of Receipt
Mailing Address 333 North Madison	Street	10 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14682380
<u>Joliet</u>	IL 60435-8200	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Provena Saint Joseph Medi- cal Center	Occupation Chairman	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) Mr. Robert T. Clarke		Date of Receipt
Mailing Address 800 North Rutledge	Street	10 29 7 2007
City	State Zip Code	Transaction ID: 14682387
Springfield	IL 62781-0002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Memorial Health System	Occupation President & Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Mr Edgar J Curtis, , R.N.		Date of Receipt
Mailing Address 701 North First Street	et	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14682388
Springfield	IL 62781-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Memorial Health System	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
)	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 156 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. David S. Fox		Date of Receipt
Mailing Address 3815 HIghland Avenu	State Zip Code	10 29 2007
Downers Grove	IL 60515-1500	Transaction ID: 14682389 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Advocate Good Samaritan Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Colleen Kannaday, , FACHE	Church	Date of Receipt
Mailing Address 12935 South Gregory	10 29 2007	
City	State Zip Code	Transaction ID: 14682390
Blue Island	IL 60406-2428	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Francis Hospital & He- alth Center	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) Dr. Wayne M Lerner, , DPH		Date of Receipt
Mailing Address 2701 West 68th Street	et	10 29 2007
City	State Zip Code	Transaction ID: 14682391
Chicago	IL 60629-1813	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Holy Cross Hospital	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
CURTOTAL of Possints This Poss (antique)		1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 156 (check only one) X	
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions	
Full Name (Last, First, Middle Initial) Ms. Mary Lou Mastro Mailing Address 852 West Street			Date of Receipt	
City Naperville FEC ID number of contributing	State IL	Zip Code 60540-6400	1 0 2 9 2 0 0 7 Transaction ID: 14682393 Amount of Each Receipt this Period 250.00	
Receipt For: Primary Other (specify) General	Occupatio Chief Exc	n ecutive Officer e Year-to-Date ▼ 750.00		
Full Name (Last, First, Middle Initial) Mr. Dennis C Millirons, , FACHE Mailing Address 801 S Milwaukee Av	renue		Date of Receipt 10 29 2007	
City	City State Zip Code			
Libertyville	<u>IL</u>	60048-3204	Transaction ID: 14682394 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		500.00	
Name of Employer Condell Medical Center	_ ,	t and Chief Executive Officer	r	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00		
Full Name (Last, First, Middle Initial) Mr. David T Ochs			Date of Receipt	
Mailing Address 2500 West Reynolds	5		10 29 7 2007	
City	State	Zip Code	Transaction ID: 14682395	
Pontiac FEC ID number of contributing federal political committee.	C	61764-2194	Amount of Each Receipt this Period 250.00	
Name of Employer OSF Saint James - John W. Albrecht Med	Occupatio Administ	rator		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00]	
SUBTOTAL of Receipts This Page (optional))		1000.00	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 156 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to s	13 14 15 16 16 16 17 16 17 16 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19
NAME OF COMMITTEE (In Full) American Hospital Association PAC	;	
Full Name (Last, First, Middle Initial) Ms. Patricia Shehorn		Date of Receipt
Mailing Address 1225 Lake Street		10 29 2007
City	State Zip Code	Transaction ID: 14682396
Melrose Park	IL 60160-4000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Westlake Hospital	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Mr. Harry Wolin		Date of Receipt
Mailing Address P O Box 530		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14682397
<u>Havana</u>	IL 62644-0530	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mason District Hospital	Occupation Administrator and Chief Executive Offi	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) Mr. John Bomher		Date of Receipt
Mailing Address 1151 E. Warrenville	Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14682403
<u>Naperville</u>	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Illinois Hospital Associa- tion	Occupation VP, Associate General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
)	1250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each o	rate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 90 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	tatements may not be sold name and address of any p	or used by any perso political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
∠ A .	Full Name (Last, First, Middle Initial) Mr Richard Carlson			Date of Receipt
	Mailing Address 1000 North Allen Stree			10 29 7 2007
	City Robinson	State Zip Cod		Transaction ID: 14682409 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer St. John's Hospital	Occupation Chief Financial Office	cer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	500.00	
В.	Full Name (Last, First, Middle Initial) Ms. Kathleen Dunn Mailing Address 700 South Second Str	l		Date of Receipt
	Mailing Address 700 South Second Str	eei		10 29 7 2007
	City Springfield	State Zip Cod		Transaction ID: 14682419
	FEC ID number of contributing federal political committee.	C 02704-7	2010	Amount of Each Receipt this Period 500.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Assistant VP, Gov't	Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	500.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. Michael S Eesley			Date of Receipt
	Mailing Address 385 Millennium Drive			10 29 YYYY 2007
	City Crystal Lake	State Zip Cod		Transaction ID: 14682420
	FEC ID number of contributing federal political committee.	IL 60012-3	3/61	Amount of Each Receipt this Period 500.00
	Name of Employer Centegra Health System	Occupation President and Chief	Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	500.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
t	TOTAL This Period (last page this line number		<u>·</u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Kevin R. England Mailing Address 39 Harbauer Lane			Date of Receipt
	City	State	Zip Code	1 0 2 9 2 0 0 7 Transaction ID: 14682422
	<u>Springfield</u>	IL	62702-3444	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Memorial Health System	Occupation Presiden	n t, Clinical Support Services	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
– В.	Full Name (Last, First, Middle Initial) Mr. Raymond Grady, FACHE			Date of Receipt
	Mailing Address 2239 Charter Point Dr	10 29 2007		
	City	State	Zip Code	Transaction ID: 14689086
	Arlington Heights FEC ID number of contributing federal political committee.	C	60004-7226	Amount of Each Receipt this Period 500.00
	Name of Employer Evanston Northwestern Hea- Ithcare	Occupation Presiden	n t, Hospitals and Clinics	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 812.50	
С. С.	Full Name (Last, First, Middle Initial) Mr. Alan Halfen			Date of Receipt
	Mailing Address 612 Greendale Road			10 29 2007
	City Glenview	State IL	Zip Code 60025-3908	Transaction ID: 14689090 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00023-3900	250.00
	Name of Employer Evanston Hospital	Occupation Assistant	n t Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
	TOTAL This Period (last page this line number		<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 156 (check only one) X
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
<u>V</u>	Full Name (Last, First, Middle Initial) Mr. James M. Hohner Mailing Address 2159 W. Agatite			Date of Receipt 10 29 2007
	City Chicago	State IL	Zip Code 60625-1705	Transaction ID: 14691642 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Advocate Health Care Receipt For: Primary General Other (specify) ▼	. '	n Advocate Health Care Foun e Year-to-Date ▼ 250.00	dat
	Full Name (Last, First, Middle Initial) Ms. Patricia Keel Mailing Address 333 North Madison			Date of Receipt 1 0 2 9 2 0 0 7
	City	State	Zip Code	Transaction ID: 14692185
	<u>Joliet</u>	IL	60435-8200	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Provena Health	- ' · · ·	Chief Financial Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Zbigniew Lorenc Mailing Address 6710 Concord Trail			Date of Receipt 1 0 2 9 2 0 0 7
	City	State	Zip Code	Transaction ID: 14693821
	Crystal Lake FEC ID number of contributing federal political committee.	C	60012-3147	Amount of Each Receipt this Period 250.00
	Name of Employer Centegra Memorial Medical Center	1 '	sident, Medical Affairs	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	I		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) American Hospital Association PAC					
Full Name (Last, First, Middle Initial) Ms. Angela McAuley		Date of Receipt			
Mailing Address 1301 Winston Circle	Chake 7'- Cada	10 29 2007			
City Woodstock	State Zip Code IL 60098-3678	Transaction ID: 14693822			
FEC ID number of contributing federal political committee.	C 00090-3070	Amount of Each Receipt this Period 250.00			
Name of Employer Centegra Memorial Medical Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Senior Vice President, Women's Healt Aggregate Year-to-Date 250.00	<u>+</u>			
Full Name (Last, First, Middle Initial) Mr. Dominic Nakis Mailing Address 2008 Piver Woods Private Management		Date of Receipt			
Mailing Address 2268 River Woods Driv	Mailing Address 2268 River Woods Drive				
City	State Zip Code	Transaction ID: 14694255			
Naperville	IL 60565-6351	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer Advocate Health Care	Occupation Vice President, Finance				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) Mr. Michael L. Nelson		Date of Receipt			
Mailing Address 1904 Montview		10 29 2007			
City	State Zip Code	Transaction ID: 14694256			
Godfrey	IL 62035-1615	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer Saint Anthony's Health Ce- nter	Occupation Administrator				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify)	250.00				
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1000.00			
TOTAL This Period (last page this line number	<u> </u>				

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any perso name and address of any political committee to	
Full Name (Last, First, Middle Initial) Ms. Donna Roach Mailing Address 413 Park Avenue City Clarendon Hills FEC ID number of contributing federal political committee. Name of Employer Condell Medical Center Receipt For: Primary General	State Zip Code IL 60514-2701 C Occupation Vice President, Information Services Aggregate Year-to-Date ▼ 250.00	Date of Receipt 10 29 2007 Transaction ID: 14695475 Amount of Each Receipt this Period 250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Robert Rosenberger Mailing Address 32 Rock River Court City Naperville FEC ID number of contributing federal political committee.	State Zip Code IL 60565-6347	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 2 9 2 0 0 7 Transaction ID: 14695476 Amount of Each Receipt this Period 250.00
Name of Employer Centegra Memorial Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. James M. Sanger Mailing Address 20 Clear Lake City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Centralia FEC ID number of contributing federal political committee.	IL 62801-3720	Amount of Each Receipt this Period 500.00
Name of Employer St. Mary's Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	nd Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	C	
Full Name (Last, First, Middle Initial) Mr. David A Schertz		Date of Receipt
Mailing Address 5666 East State St		10 29 2007
City Rockford	State Zip Code IL 61108-2472	Transaction ID: 14695479 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer OSF Saint Anthony Medical Center	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Jason Sciarro	I	Date of Receipt
Mailing Address 14255 Castlebar Tr	rail	10 29 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14696858
Woodstock FEC ID number of contributing federal political committee.	IL 60098-8881	Amount of Each Receipt this Period 500.00
Name of Employer Centegra Memorial Medical Center	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Aaron T. Shepley		Date of Receipt
Mailing Address 385 Millennium Dri	ve	10 29 2007
City	State Zip Code	Transaction ID: 14696862
Crystal Lake FEC ID number of contributing federal political committee.	IL 60012-3740	Amount of Each Receipt this Period 250.00
Name of Employer Centegra Health System	Occupation Chief Quality Officer/General Counse	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	l	1250.00
	aber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. JoAnna White Mailing Address 20719 Highview City Marengo FEC ID number of contributing federal political committee. Name of Employer Centegra Northern Illinois Medical Cen Receipt For: Primary General Other (specify)	State Zip Code IL 60152-9687 C Occupation Chief Nursing Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. James M. Sanger Mailing Address 20 Clear Lake City Centralia FEC ID number of contributing federal political committee. Name of Employer St. Mary's Hospital Receipt For: Primary General Other (specify)	State Zip Code IL 62801-3720 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M M / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Thomas Nordwick Mailing Address P O Box 1450 City Douglas FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital of Converse County Receipt For:	State Zip Code WY 82633-1450 C Occupation President and Chief Executive Officer Aggregate Year-to-Date	Date of Receipt M M M / 29 / 2007 Transaction ID: 14703946 Amount of Each Receipt this Period 500.00
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	500.00	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	FOR LINE NUMBER: PAGE 97 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 1		
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Daniel J. Perdue		Date of Receipt	
Mailing Address 2005 Warren Avenue Post Office Box 249		10 29 2007	
City <u>Cheyenne</u>	State Zip Code WY 82001-3725	Transaction ID: 14703948 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Wyoming Hospital Associa- tion	Occupation President	1	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Mr. Charles F. Harms		Date of Receipt	
Mailing Address 2520 Moonlight Ct.		10 29 2007	
City	State Zip Code	Transaction ID: 14703950	
Cheyenne	WY 82009-8572	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	375.00	
Name of Employer Cheyenne Regional Medical Center	Occupation Chief Executive Officer		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		
Full Name (Last, First, Middle Initial) Mr. Kenneth Hanover		Date of Receipt	
Mailing Address 3200 Burnet Avenue		10 22 YYYY 2007	
City	State Zip Code	Transaction ID: 14705636	
Cincinnati	OH 45229-3019	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	1000.00	
Name of Employer Health Alliance of Greater Cincinnati	Occupation President and Chief Executive Officer		
Receipt For: Primary General	Aggregate Year-to-Date ▼		
Other (specify)	1000.00		
SURTOTAL of Receipts This Page (optional)		1625.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		1625.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 156 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and addr	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Lynn M Abrahamsen Mailing Address 701 Park Avenue S		7. 0.4	Date of Receipt M
City Minneapolis FEC ID number of contributing	State MN	Zip Code 55415-1829	Transaction ID: 14716129 Amount of Each Receipt this Period 250.00
Name of Employer Hennepin County Medical Center Receipt For: Primary General Other (specify)	Occupation Administra	ator Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr. Matthew Anderson, JD Mailing Address 2550 University Av	enue W.		Date of Receipt 10 29 2007
City	State	Zip Code	Transaction ID: 14716131
Saint Paul	MN	55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		390.00
Name of Employer Minnesota Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Regulatory/Strategic Affair Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) Ms. Debra K Boardman Mailing Address 323 South Minnesc	nta Street		Date of Receipt
		7'- 0-4-	10 29 2007
City Crookston	State MN	Zip Code 56716-1600	Transaction ID: 14716133 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	55.15.1555	225.00
Name of Employer Riverview Healthcare Association Receipt For: Primary General Other (specify) ▼	- + +	and Chief Executive Officer Year-to-Date ▼ 360.00]
SUBTOTAL of Receipts This Page (options	al)		865.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Rocklon B. Chapin Mailing Address 502 East Second Stre City Duluth FEC ID number of contributing federal political committee. Name of Employer St. Mary's/Duluth Clinic Health System Receipt For: Primary General Other (specify)	et State Zip Code MN 55805-1982 C Occupation Executive Vice President & Sr. Office Aggregate Year-to-Date ▼ 520.00	Date of Receipt 10 29 2007 Transaction ID: 14716152 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. James Christensen Mailing Address 200 14th Avenue E City Sartell FEC ID number of contributing federal political committee.	State Zip Code MN 56377-4500	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Array Services Group Receipt For: Primary General Other (specify) ▼	Occupation CEO Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Ms Susan Doherty Mailing Address 720 Fourth Street Nor City	th State Zip Code	Date of Receipt M M
Fargo FEC ID number of contributing federal political committee.	ND 58122-4520	Amount of Each Receipt this Period 150.00
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Manager Public Policy and Government Aggregate Year-to-Date 500.00	ent R
SUBTOTAL of Receipts This Page (optional)	<u> </u>	900.00

SCHEDULE A (FEC Form 3: ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 156 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>	arooo or ary pointed committee to	
Full Name (Last, First, Middle Initial) Dr David Erickson			Date of Receipt
Mailing Address P O Box 38			10 29 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Yankton	State SD	Zip Code 57078-0038	Transaction ID: 14716163 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Avera Health	Occupation Senior Vi	n ice President and Chief Med	— ica
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Mark Eustis	I		Date of Receipt
Mailing Address 2450 Riverside Ave	enue		10 29 2007
City Minneapolis	State MN	Zip Code 55454-1450	Transaction ID: 14716248
FEC ID number of contributing federal political committee.	C	33434-1430	Amount of Each Receipt this Period 500.00
Name of Employer Fairview Health Services	Occupation President	n t and CEO	7
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. David Feinwachs			Date of Receipt
Mailing Address 2550 University Av Suite 350-S	venue West		10 29 2007
City Saint Paul	State MN	Zip Code	Transaction ID: 14716251
FEC ID number of contributing federal political committee.	C	55114-1052	Amount of Each Receipt this Period 250.00
Name of Employer Minnesota Hospital Associ- ation	Occupation General	Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (option	-1)		875.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James F Hanko Mailing Address 1300 Anne Street NV City Bemidji FEC ID number of contributing federal political committee. Name of Employer North Country Regional Hospital Receipt For: Primary General	N State Zip Code MN 56601-5103 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 350.45	Date of Receipt M M M / 29 / 2007 Transaction ID: 14716355 Amount of Each Receipt this Period 190.00
Full Name (Last, First, Middle Initial) Ms. Mary Krinkie Mailing Address 2550 University Average Suite 350-S City Saint Paul FEC ID number of contributing		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 600.00	_
Full Name (Last, First, Middle Initial) Mr. Dennis C Miley Mailing Address 415 North Jefferson		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wadena FEC ID number of contributing	State Zip Code MN 56482-1297	Transaction ID: 14716427 Amount of Each Receipt this Period
federal political committee. Name of Employer Tri-County Hospital	Occupation Administrator	250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	_	540.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 156 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Peter E Person, , M.D. Mailing Address 502 East Second S	Street		Date of Receipt
City Duluth	State MN	Zip Code 55805-1982	Transaction ID: 14716461 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer St. Mary's/Duluth Clinic Health System Receipt For: Primary General Other (specify) ▼		and Chief Executive Officer Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Daniel J Reiner Mailing Address 200 North Elm Stre	eet		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14716477
Onamia	MN	56359-7901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		450.00
Name of Employer Mille Lacs Health System	 	ator and Chief Executive Of	fi
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Mr. Bruce J. Rueben	•		Date of Receipt
Mailing Address 4885 Pheasant Co	urt South		10 29 2007
City	State	Zip Code	Transaction ID: 14716478
Afton FEC ID number of contributing federal political committee.	C	55001-9415	Amount of Each Receipt this Period 231.00
Name of Employer Minnesota Hospital Associ- ation	Occupation President	_	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 231.00	
SUBTOTAL of Receipts This Page (optional	al)		931.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full)		CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 156 (check only one) X 11a
A. D. Peter Smith, M.D. Mailing Address 100 Fallwood Road City Redwood Falls MN 58283-1828 FEC ID number of contributing federal political committee. Receipt For: Primary General Other (specify) ▼ Transaction ID: 14716512 Amount of Each Receipt this Period Primary General Other (specify) ▼ Date of Receipt Trustee Receipt For: Primary General Other (specify) ▼ FEC ID number of contributing federal political committee. Date of Receipt Transaction ID: 14716504 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Date of Receipt Transaction ID: 14716512 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C. State Zip Code MN 55051-1899 FEC ID number of contributing federal political committee. C. State Zip Code Transaction ID: 14716512 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C. State Zip Code Transaction ID: 14716512 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716512 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716512 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716512 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716513 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716513 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716513 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716513 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716513 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716513 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716513 Date of Receipt Transaction ID: 14716513 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716513 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716513 Date of Receipt Transaction ID: 14716512 Date of Receipt Tr	or f	or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements mand add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Receipt For: Primary	A.	Dr. Peter Smith, M.D. Mailing Address 100 Fallwood Road City Redwood Falls FEC ID number of contributing federal political committee.	MN	56283-1828	Transaction ID: 14716504 Amount of Each Receipt this Period
Mailing Address 301 South Highway 65 City State Zip Code MN 55051-1899 FEC ID number of contributing federal political committee. Name of Employer Ranabse Hospital City State Zip Code MN 55051-1899 FEUI Name (Last, First, Middle Initial) Mr. Carl P Vaagenes Mailing Address 815 Second Street SE City State Zip Code MN 56345-3596 FEC ID number of contributing federal political committee. Date of Receipt Transaction ID: 14716512 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716512 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14716513 Date of Receipt Transaction ID: 14716513 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer St. Gabriel's Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼		Receipt For: Primary General	-		
City State Zip Code MN 55051-1899 FEC ID number of contributing federal political committee. Name of Employer Kanabec Hospital Primary General Other (specify) ▼ City State Zip Code MN 55051-1899 Parimary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mn 56345-3596 Full Name (Last, First, Middle Initial) Mn 56345-3596 Fill Name (Last, First, Middle Initial) Mn 56345-3596 FEC ID number of contributing federal political committee. Name of Employer St. Gabriel's Hospital Primary General Other (specify) ▼ Occupation President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼	3.	Mr. Randy Ülseth			M M / D D / Y Y Y Y
Name of Employer Kanabec Hospital Receipt For: Primary General Other (specify) ▼ Pagregate Year-to-Date ▼ Bull Name (Last, First, Middle Initial) Mr. Carl P Vaagenes Mailing Address 815 Second Street SE City State Zip Code Little Falls MN 56345-3596 FEC ID number of contributing federal political committee. Name of Employer St. Gabriel's Hospital Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼		Mora FEC ID number of contributing	MN	•	Amount of Each Receipt this Period
Primary		Name of Employer Kanabec Hospital	Occupatio Chief Exc	ecutive Officer	
Mr. Carl P Vaagenes Mailing Address 815 Second Street SE City State Zip Code Little Falls MN 56345-3596 FEC ID number of contributing federal political committee. Name of Employer St. Gabriel's Hospital Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M		Primary General	Aggregate	1 1 1 1 1 1 1]
City State Zip Code MN 56345-3596 FEC ID number of contributing federal political committee. Name of Employer St. Gabriel's Hospital President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1175.00).	Mr. Carl P Vaagenes			M M / D D / Y Y Y Y
Name of Employer St. Gabriel's Hospital President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		•		•	Transaction ID: 14716513
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00			C		425.00
Primary General Other (specify) ▼ 425.00		Name of Employer St. Gabriel's Hospital			r
SUBTOTAL of Receipts This Page (optional)		Primary General	Aggregate		
	SU	JBTOTAL of Receipts This Page (optional)			1175.00

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 11		
Any information copied from or for commercial purposes, NAME OF COMMITTEE	other than using the name and a	nay not be sold or used by any pers address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.		
American Hospital As	, ,				
Full Name (Last, First, M Ms. Mary Ellen Wells Mailing Address 1095	iddle Initial) Highway 15 South		Date of Receipt		
			10 29 2007		
City Hutchinson	State MN	Zip Code 55350-5000	Transaction ID: 14716515 Amount of Each Receipt this Period		
FEC ID number of contribution federal political committee	outing		250.00		
Name of Employer Hutchinson Area Health re	Ca- Occupa Preside				
Receipt For: Primary Other (specify) ▼	Aggrega	ate Year-to-Date ▼ 250.00			
Full Name (Last, First, M Ms. Peggy Westby			Date of Receipt		
	Mailing Address 2550 University Avenue W. Suite 350-S				
City Saint Paul	State MN	Zip Code	Transaction ID: 14716519		
FEC ID number of contribution federal political committee	outing	55114-1052	Amount of Each Receipt this Period 125.00		
Name of Employer Minnesota Hospital Asso ation	ci- Occupa Vice Pi	tion resident			
Receipt For: Primary Other (specify) ▼	Aggrega	ate Year-to-Date ▼ 375.00			
Full Name (Last, First, M Ms. Lori L Wightman	iddle Initial)		Date of Receipt		
Mailing Address POE	Box 577		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 14716521		
New Ulm FEC ID number of contril federal political committee		56073-0577	Amount of Each Receipt this Period 250.00		
Name of Employer New Ulm Medical Center	Occupa Preside				
Receipt For: Primary Other (specify) ▼		ate Year-to-Date ▼ 250.00			

Magagahuadtta Haanital Aa	ive Park State Zip Code MA 01803-5010 C Occupation Vice President, Government Advocacy Aggregate Year-to-Date	Date of Receipt Date of Receipt
Mr. Robert E. Gibbons Mailing Address Five New England Execut City Burlington FEC ID number of contributing federal political committee. Name of Employer Massachusetts Hospital Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenue City	State Zip Code MA 01803-5010 C Occupation Vice President, Government Advocacy Aggregate Year-to-Date 550.00	Transaction ID: 14716534 Amount of Each Receipt this Period 550.00
Burlington FEC ID number of contributing federal political committee. Name of Employer Massachusetts Hospital Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenue City	MA 01803-5010 C Occupation Vice President, Government Advocacy Aggregate Year-to-Date ▼ 550.00	Amount of Each Receipt this Period 550.00
FEC ID number of contributing federal political committee. Name of Employer Massachusetts Hospital Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenue City	Occupation Vice President, Government Advocacy Aggregate Year-to-Date 550.00	550.00
sociation Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenue City	Vice President, Government Advocacy Aggregate Year-to-Date ▼ 550.00	
Mr. Dale M Lodge Mailing Address 41 Highland Avenue City		
•		Date of Receipt 1 0 2 4 2 0 0 7
Wineheater	State Zip Code	Transaction ID: 14716535
Winchester	MA 01890-1496	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Winchester Hośpital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Paul Ponte		Date of Receipt
Mailing Address 2014 Washington Street		10 24 2007
City Newton Lower Falls	State Zip Code MA 02462-1607	Transaction ID: 14716536 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 02402-1007	500.00
Newton-Welleclay Hospital	Occupation Manager, Environmental Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		2050.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 156 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>	71	
Full Name (Last, First, Middle Initial) Mr. Richard Palumbo			Date of Receipt
Mailing Address 330 Mount Auburn	Street		M M / D D / Y Y Y Y Y 1 1 0 2 4 2 0 0 7
City Cambridge	State MA	Zip Code 02138-5502	Transaction ID: 14716537
FEC ID number of contributing federal political committee.	C	02130-3302	Amount of Each Receipt this Period 250.00
Name of Employer Mount Auburn Hospital	Occupation Director	n	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Trace Hicks			Date of Receipt
Mailing Address 10 Fox Hollow Gre	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Delmar	State NY	Zip Code 12054	Transaction ID: 14716539
FEC ID number of contributing federal political committee.	C	12004	Amount of Each Receipt this Period 250.00
Name of Employer Accuro Healthcare Systems	Occupation Director	n of Sales, Northeast	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas E Wilhelmsen, , Jr.			Date of Receipt
Mailing Address P O Box 2014			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14716545
Nashua FEC ID number of contributing federal political committee.	C	03061-2014	Amount of Each Receipt this Period 250.00
Name of Employer Southern New Hampshire Me- dical Center		t and Chief Executive Officer	·
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107/156 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,	
Full Name (Last, First, Middle Initial) Mr. Harvey M Yorke			Date of Receipt
Mailing Address 100 Hospital Drive B	East		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bennington	State VT	Zip Code 05201-5004	Transaction ID: 14716546 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00201	250.00
Name of Employer Southwestern Vermont Medical Center Receipt For: Primary General Other (specify) ▼	1	n t and Chief Executive Officer Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Robert C Chapman, , FACHE Mailing Address 3000 Galleria Towe	r, Ste 1700		Date of Receipt
City	State	Zip Code	1 0 2 2 2 0 0 7 Transaction ID: 14718294
Birmingham	AL	35244-2378	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer St. Vincent's Health Syst- em	Occupatio Presiden	n t and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Ellen C Briley			Date of Receipt
Mailing Address 987 Drayton Street			M M / D D / Y Y Y Y Y Y 10 10 10 10 10 10 10 10 10 10 10 10 10
City Elba	State AL	Zip Code 36323-1494	Transaction ID: 14718295 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00020 1404	250.00
Name of Employer Elba General Hospital	Occupatio Administ	n rator and Chief Executive Of	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	I		1500.00

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for comercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last; First, Middle Initial) Mr. Dowald Henderison Mailing Address 8213 Marsh Pointe Drive City State Zip Code Montgomery AL 36117-7432 FEC ID number of contributing federal political committee. Name of Employer John Mailing Address 4000 Lincoln Boulevard City State Zip Code Primary General Other (specify) ▼ State Zip Code Name of Employer John Mailing Address 4000 Lincoln Boulevard City State Zip Code Name of Employer John Mailing Address 4000 Lincoln Boulevard City State Zip Code Okk 73105-5207 FEC ID number of contributing federal political committee. Name of Employer John Mailing Address 4414 Manchester Court City State Zip Code Name (Last, First, Middle Initial) Mailing Address 4414 Manchester Court City State Zip Code Norman Occupation Docupation Occupation Docupation Occupation Docupation Occupation Docupation Occupation Docupation Docupatio	SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Mailing Address 8213 Marsh Pointe Drive City State Zip Code Montgomery AL 36117-7432 FEC ID number of contributing federal political committee. President President President Spain Address 4000 Lincoln Boulevard City State Zip Code Amount of Each Receipt this Period Date of Receipt Firmary General Other (specify) ▼ State Zip Code Oklahoma City Oklahoma City Oklahoma City Occupation President and Chief Financial Off Receipt For: Primary General Other (specify) ▼ State Zip Code Oklahoma Regional Hospital Position President and Chief Financial Off Receipt For: Primary General Other (specify) ▼ State Zip Code Oklahoma Regional Hospital Name (Last, First, Middle Initial) Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 147121250 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721250 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721250 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721250 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721250 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721252 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721252 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721252 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721252 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721252 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721252 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721252 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721252 Date of Receipt Transaction ID: 14721252 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721252 Date of Receipt Transaction ID: 14721252 Amount of Each Receipt this Period Sou.00 Date of Receipt Transaction ID: 14721252 Date	or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Receipt For: Primary General Aggregate Year-to-Date ▼ Primary General 250.00 Receipt Transaction ID: 14721250 Aggregate Year-to-Date Transaction ID: 14721250 Aggregate Year-to-Date Transaction ID: 14721250 Aggregate Year-to-Date Transaction ID: 14721250 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ C State Zip Code Transaction ID: 14721250 Amount of Each Receipt this Period Feceipt For: Primary General Other (specify) ▼ C State Zip Code Transaction ID: 14721250 Aggregate Year-to-Date Transaction ID: 14721250 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14721250 Amount of Each Receipt this Period Transaction ID: 14721250 Amount of Each Receipt this Period Transaction ID: 14721252 Amount of Each Receipt this Period Transaction ID: 14721252 Amount of Each Receipt this Period Soo.00 Transaction ID: 14721252 Amount of Each Receipt this Period Soo.00 Transaction ID: 14721252 Amount of Each Receipt this Period Soo.00 Transaction ID: 14721252 Amount of Each Receipt this Period Soo.00 Soo.00 Soo.00	Mr. Donald Henderson Mailing Address 8213 Marsh Pointe City Montgomery FEC ID number of contributing federal political committee. Name of Employer Jackson Hospital and Clin-	State Zip Code AL 36117-7432 C Occupation	1 0 2 2 2 2 0 0 7 Transaction ID: 14718296 Amount of Each Receipt this Period
Mailing Address 4000 Lincoln Boulevard City State Zip Code OK 73105-5207 FEC ID number of contributing federal political committee. Name of Employer Oklahoma Dity State Zip Code Other (specify) ▼ FC ID number of contributing federal Dittical committee. Patroical Date of Receipt Transaction ID: 14721250 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Transaction ID: 14721250 Amount of Each Receipt this Period Federal Dittical committee. Date of Receipt Transaction ID: 14721250 Amount of Each Receipt this Period Full Name (Last, First, Middle Initial) Ms. Patricia Davis Mailing Address 4414 Manchester Court City State Zip Code Norman OK 73072-3915 FEC ID number of contributing federal political committee. C Transaction ID: 14721252 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C State Zip Code Norman OK 73072-3915 FEC ID number of contributing federal political committee. C State Zip Code Norman OK 73072-3915 Aggregate Year-to-Date ▼ Docupation Executive Vice President Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Sip Code Transaction ID: 14721252 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C State Sip Code Transaction ID: 14721252 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C State Sip Code Transaction ID: 14721252 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. State Sign Code Transaction ID: 14721252 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. State Sign Code Transaction ID: 14721252 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. State Sign Code Transaction ID: 14721252 Amount of Each Receipt this Period	Receipt For: Primary General		
Oklahoma City OK 73105-5207 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Duncan Regional Hospital Name of Employer Duncan Regional Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Patricia Davis Mailing Address 4414 Manchester Court City State Zip Code Norman OK 73072-3915 FEC ID number of contributing federal political committee. Name of Employer Oklahoma Hospital Association Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period Date of Receipt Transaction ID: 14721252 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Soo.00	Ms. Patricia Andersen	evard	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Duncan Regional Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Patricia Davis Mailing Address 4414 Manchester Court City State Zip Code OK 73072-3915 FEC ID number of contributing federal political committee. Name of Employer Oklanoma Hospital Association Receipt For: Primary General Off Occupation C Cocupation Executive Vice President Aggregate Year-to-Date ▼ Transaction ID: 14721252 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ State Zip Code OK 73072-3915 C State Zip Code OK 73072-3915 FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ State Zip Code OK 73072-3915 FEC ID number of contributing federal Political Committee. Aggregate Year-to-Date ▼ State Zip Code OK 73072-3915 Amount of Each Receipt this Period State Size Size Size Size Size Size Size Siz	•	•	
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Ms. Patricia Davis Mailing Address 4414 Manchester Court City State Zip Code Norman OK 73072-3915 FEC ID number of contributing federal political committee. Name of Employer Oklahoma Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation Executive Vice President Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 1250.00	FEC ID number of contributing		
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Patricia Davis Mailing Address 4414 Manchester Court City State Zip Code Norman OK 73072-3915 FEC ID number of contributing federal political committee. Name of Employer Oklahoma Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation Executive Vice President Aggregate Year-to-Date ▼ 1250.00	Name of Employer Duncan Regional Hospital	· ·	,
Ms. Patricia Davis Mailing Address 4414 Manchester Court City State Zip Code Norman OK 73072-3915 FEC ID number of contributing federal political committee. Name of Employer Oklahoma Hospital Association Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 14721252 Amount of Each Receipt this Period 500.00	Primary General	Aggregate Year-to-Date ▼	
Mailing Address 4414 Manchester Court City State Zip Code Norman OK 73072-3915 FEC ID number of contributing federal political committee. Name of Employer Oklahoma Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 100 24 12007 Transaction ID: 14721252 Amount of Each Receipt this Period 500.00			Date of Receipt
City Norman State Zip Code OK 73072-3915 FEC ID number of contributing federal political committee. Name of Employer Oklahoma Hospital Association Receipt For: Primary General Other (specify) ▼ State Zip Code Transaction ID: 14721252 Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date ▼ 500.00	-	Court	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Oklahoma Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00	City	•	
Name of Employer Oklahoma Hospital Association Receipt For: Primary Other (specify) ▼ Occupation Executive Vice President Aggregate Year-to-Date 500.00		OK 73072-3915	Amount of Each Receipt this Period
tion Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date ▼		C	500.00
Primary General Other (specify) ▼ 500.00	tion	Executive Vice President	
SUBTOTAL of Pagainta This Paga (entional)	Primary General		
SUBTOTAL of Neceipts This rage (optional)	SUBTOTAL of Receipts This Page (option	al)	1250.00

TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
or for commercial purposes, other than using t	Statements may not be sold or used by any person he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Joe Duerr		Date of Receipt
Mailing Address 501 14th Street City	State Zip Code	10 24 2007
Perry	OK 73077-5099	Transaction ID: 14722395 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	48.00
Name of Employer Perry Memorial Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 173.00	
Full Name (Last, First, Middle Initial) Mr. Joe Duerr		Date of Receipt
Mailing Address 501 14th Street		10 24 2007
City	State Zip Code	Transaction ID: 14722398
<u>Perry</u>	OK 73077-5099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Perry Memorial Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 223.00	
Full Name (Last, First, Middle Initial) Ms. Cynthia Duncan		Date of Receipt
Mailing Address 1115 East Jasmine		10 24 2007
City <u>Frederick</u>	State Zip Code OK 73542-4020	Transaction ID: 14722400
FEC ID number of contributing federal political committee.	C 73542-4020	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Hospital and Phy- sician Group	Occupation Director, Human Resources	7
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00]
CUPTOTAL (Descripto This Descriptoral)		348.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate so for each categor Detailed Summa	y of the
A	r for commercial purposes, other than using the	tatements may not be sold or used name and address of any politica	d by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. B. Joe Gunn		Date of Receipt
	Mailing Address Post Office Box 326		10 24 2007
	City Vinita	State Zip Code OK 74301-0326	Transaction ID: 14724050 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Craig General Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	500.00
_	Full Name (Last, First, Middle Initial) Ms. Debbie Howe	L	Date of Receipt
	Mailing Address Post Office Box 489		10 24 2007
	City	State Zip Code OK 73763-0489	Transaction ID: 14724052
	Okeene FEC ID number of contributing federal political committee.	OK 73763-0489	Amount of Each Receipt this Period 250.00
	Name of Employer Weatherford Regional Hosp- ital	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
_	Full Name (Last, First, Middle Initial) Ms. Linda Jones	I	Date of Receipt
	Mailing Address 122 North 12th Street		10 24 2007
	City	State Zip Code	Transaction ID: 14724660
	Frederick FEC ID number of contributing federal political committee.	OK 73542-5629	Amount of Each Receipt this Period 250.00
	Name of Employer Memorial Hospital and Phy- sician Group	Occupation Nursing Administrator	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	250.00
Γ	SUBTOTAL of Receipts This Page (optional) .	I	1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any perso g the name and address of any political committee to C	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Greg Martin Mailing Address 1310 South Main S	Street	Date of Receipt
City Grove	State Zip Code OK 74344-1348	Transaction ID: 14724663 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Integris Grove General Ho- spital Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Ms. Sheryl R. McLain, MS Mailing Address 2301 Steeplechase	e Road	Date of Receipt
City	State Zip Code	Transaction ID: 14724665
Edmond FEC ID number of contributing	OK 73034-5893	Amount of Each Receipt this Period
federal political committee.	C	500.00
Name of Employer Oklahoma Hospital Associa- tion	Occupation Vice President, Communications	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Gloria Thurman		Date of Receipt
Mailing Address 319 East Josephin	е	10 24 2007
City	State Zip Code	Transaction ID: 14724717
Frederick FEC ID number of contributing federal political committee.	OK 73542-2220	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Hospital and Phy- sician Group	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 156 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any person dress of any political committee to	13 14 15 16 0 16 0 17 0 17 0 18 0 19 0 19 0 19 0 19 0 19 0 19 0 19
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Mr. Karl Weinmeister			Date of Receipt
Mailing Address 3300 Northwest Expre	essway		10 24 2007
City	State	Zip Code	Transaction ID: 14724758
Oklahoma City	OK	73112-4418	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Integris Baptist Medical	Occupatio Managin	n g Director	
Center Receipt For:	- '	e Year-to-Date ▼	\dashv
Primary General	Aggregate		7
Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Mr. David D Whitaker, , FACHE			Date of Receipt
Mailing Address P O Box 1308			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14724759
Norman	OK	73070-1308	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Norman Regional Health Sy- stem	Occupatio Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Mary Winters			Date of Receipt
Mailing Address 3808 Skyward Circle			10 24 2007
City	State	Zip Code	Transaction ID: 14724760
Yukon	OK	73099-3220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Oklahoma Hospital Associa- tion	Occupatio Vice Pre	n sident Support Services	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	55 0	250.00	
SUBTOTAL of Receipts This Page (optional)	1		1000.00

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Ar or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any pre name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Mr. Brian K Woodliff		Date of Receipt
	Mailing Address P O Box 1008		10 24 2007
	City Tahlequah	State Zip Code OK 74465-1008	Transaction ID: 14724761 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Tahlequah City Hospital	Occupation Chief Executive Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
	Full Name (Last, First, Middle Initial) Katie Vaughan	. L	Date of Receipt
	Mailing Address 506 A East Howell Av	M " M / D " D / Y " Y " Y " Y	
	City	State Zip Code	Transaction ID: PR1034595119674
	Alexandria	VA 22301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	440.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	NW	M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR1045726219674
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation VP & Chief Washington Counsel	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	D/D Doduction (#50.00 B)
	Other (specify)	800.00	P/R Deduction (\$50.00 Bi- Weekly)
			390.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 156 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Barbara Jellen		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	M M / D D / Y Y Y
City	State Zip Code	Transaction ID: PR1113464219674
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer American Hospital Associa-	Occupation Section Director	
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	212.50	P/R Deduction (\$12.50 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Sohini Jindal		Date of Receipt
Mailing Address 325 Seventh Street, N	W	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR1125613619674
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa-	Occupation Senior Associate Director	
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	440.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Davon Gray		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR1143013019674
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	21.74
Name of Employer American Hospital Associa- tion-Washingt	Occupation Legislative Assistant	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	206.53	P/R Deduction (\$10.86 Bi- Weekly)
CURTOTAL of Descints This Daws (entired)		86.74

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Ms. Michelle Marie Mathy		Date of Receipt
	Mailing Address 1660 Lanier Place NV Apt. 309	I	M M / D D / Y Y Y Y
	City Washington	State Zip Code DC 20009-2947	Transaction ID: PR1300853719674 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.84
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify)	Occupation Project Manager/PAC Coordinator Aggregate Year-to-Date 208.40	P/R Deduction (\$10.34 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Emily Claire Francis		Date of Receipt
	Mailing Address 1200 North Veitch Str Apt. 1023	M M / D D / Y Y Y Y	
	City	State Zip Code	Transaction ID: PR1315883919674
	Arlington FEC ID number of contributing federal political committee.	VA 22201-5818	Amount of Each Receipt this Period 19.24
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Project Manager	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 211.64	P/R Deduction (\$9.62 Bi-W-eekly)
	Full Name (Last, First, Middle Initial) Mr. Alex White, Jr.		Date of Receipt
	Mailing Address One North Franklin		M " M / D " D / Y " Y " Y " Y
	City	State Zip Code	Transaction ID: PR1339349919674
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 120.00
	Name of Employer American Hospital Associa- tion	Occupation Account Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1260.00	P/R Deduction (\$60.00 Bi- Weekly)
<u> </u>	IIRTOTAL of Receipts This Page (optional)		160.08

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	fc	se separate schedule(s) or each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 116 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may not e name and address	be sold or used by any perso of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>/</u>	Full Name (Last, First, Middle Initial) Ms. Frances Margolin			Date of Receipt
	Mailing Address One North Franklin			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1347702719674
	Chicago	<u>IL</u>	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer American Hospital Associa-	Occupation Vice Presider	nt, Operatinos HRET	
	tion-Chicago Receipt For:	Aggregate Year	•	
	Primary General	Aggregate real		P/R Deduction (\$25.00 Bi-
	Other (specify) ▼		400.00	Weekly)
	Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay	1		Date of Receipt
	Mailing Address One North Franklin	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1347703619674
	Chicago	IL	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer American Hospital Associa-	Occupation Vice Presider	nt & CIO	
	tion-Chicago Receipt For:	Aggregate Year		
	Primary General	7.ggrogato roa		P/R Deduction (\$25.00 Bi-
	Other (specify)	0 0 0	400.00	Weekly)
	Full Name (Last, First, Middle Initial) Ms. Linda Fishman			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W		M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR327629119674
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		90.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice Presider	nt Federal Relations	
	Receipt For:	Aggregate Year	r-to-Date ▼	
	Primary General Other (specify) ▼		900.00	P/R Deduction (\$10.00 Bi- Weekly)
				190.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
A OI	ny information copied from such Reports and for commercial purposes, other than using th	Statements may not be sold or used by any perso e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>_</u>	Full Name (Last, First, Middle Initial) Mr. Lindsay Mac Robinson		Date of Receipt
	Mailing Address 107 East Lane		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR327727319674
	Lake Barrington	IL 60010-1939	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMGs	1
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	800.00	P/R Deduction (\$50.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Deborah F. Weiner		Date of Receipt
	Mailing Address 11004 Petersborough		M ' M / D ' D / Y ' Y ' Y ' Y
	City	State Zip Code	Transaction ID: PR327745919674
	Rockville	MD 20852-3249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Grassroots Advocacy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	800.00	P/R Deduction (\$50.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR327777819674
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	220.00	P/R Deduction (\$10.00 Bi- Weekly)
Г	NUDTOTAL (D Ti: D (.; . N		220.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 156 (check only one) X 11a
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u></u>	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele			Date of Receipt
	Mailing Address 1003 Kimberly Place			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR327801719674
	Great Falls	VA	22066-1546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer American Hospital Associa-	Occupation	n e Vice President	
	tion-Washingt Receipt For:		Year-to-Date ▼	7
	Primary General Other (specify) ▼	199.79.11	400.00	P/R Deduction (\$25.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR327812019674
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Organization of Nurse Executi	Occupation Executive	n e Director	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		1055.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan			Date of Receipt
	Mailing Address One North Franklin Str	reet		M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR327846219674
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		19.24
	Name of Employer American Hospital Associa- tion-Chicago	, '	sident, Meetings & Travel Ser	rv
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.64	P/R Deduction (\$9.50 Bi-W-eekly)
Γ	SUBTOTAL of Receipts This Page (optional)	1		149.24

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 156 (check only one) X
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u></u>	Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga			Date of Receipt
	Mailing Address 2401 Calvert Street, N Apt. 1008	W		M M / D D / Y Y Y Y
	City Washington	State DC	Zip Code 20008-2614	Transaction ID: PR327851919674 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify)	, '	Policy Development Year-to-Date 400.00	P/R Deduction (\$25.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Mr. Mark Seklecki			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR327858019674
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Executive	n e Director, AHAPAC	
	Receipt For:	. '	e Year-to-Date ▼	
	Primary General Other (specify)	0 0	880.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. John F. Barry	<u> </u>		Date of Receipt
	Mailing Address One North Franklin			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327877819674
	Millis	MA	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		86.98
	Name of Employer American Hospital Associa- tion-Chicago	, ' 	Executive	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 826.31	P/R Deduction (\$43.22 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	1	_	216.98

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any or f	r information copied from such Reports and Sor commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
- I	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. George F. Bergstrom			Date of Receipt
•	Mailing Address One North Franklin			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327895719674
	Chicago	<u> </u>	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer American Hospital Associa-	Occupatio Vice Pre		
	tion-Chicago Receipt For:		e Year-to-Date V	+
	Primary General Other (specify) ▼	7 igg ogac	400.00	P/R Deduction (\$25.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Richard J Umbdenstock			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR328132819674
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		90.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Presiden		
•	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		900.00	P/R Deduction (\$45.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach			Date of Receipt
	Mailing Address 204 South 7th Avenue)		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328136919674
	La Grange	IL	60525-6406	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer American Hospital Associa- tion-Chicago	, '	President, Member Relations	<u>, </u>
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		800.00	P/R Deduction (\$50.00 Bi- Weekly)
	JBTOTAL of Receipts This Page (optional)	1		240.00

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 156 (check only one) X
Any inf	ormation copied from such Reports and sommercial purposes, other than using the	Statements may e name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 \	ME OF COMMITTEE (In Full) nerican Hospital Association PAC			
	Name (Last, First, Middle Initial) Donna J. Melkonian			Date of Receipt
	ling Address 5545 N. Wayne			M M / D D / Y Y Y Y
City	/	State	Zip Code	Transaction ID: PR328223819674
<u>Ch</u>	icago	IL	60640-1318	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		50.00
Nar Am	ne of Employer erican Hospital Associa-	Occupation		
<u>tion</u>	n-Chicago ceipt For:	Vice Pres		_
1160	Primary General	Aggregate	Year-to-Date ▼	D/D Doduction (\$25.00 Bi
	Other (specify) ▼		400.00	P/R Deduction (\$25.00 Bi- Weekly)
	Name (Last, First, Middle Initial) James D. Bentley, Ph.D.			Date of Receipt
	ling Address 13106 Vingle Lane			M M / D D / Y Y Y Y
City	1	State	Zip Code	Transaction ID: PR328224919674
Silv	ver Spring	MD	20906	Amount of Each Receipt this Period
FE(C ID number of contributing eral political committee.	C		100.00
Nar Am	ne of Employer erican Hospital Associa- I-Washingt	Occupation Sr. Vice F		
	ceipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	99.03	800.00	P/R Deduction (\$50.00 Bi- Weekly)
	Name (Last, First, Middle Initial) Richard J. Pollack	1		Date of Receipt
	ling Address 325 Seventh Street, N Suite 700	IW		M M / D D / Y Y Y Y
City		State	Zip Code	Transaction ID: PR328260919674
<u>Wa</u>	ashington	DC	20004-2818	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		80.00
Am	me of Employer erican Hospital Associa- n-Washingt	Occupation Executive	Vice President	
	ceipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		880.00	P/R Deduction (\$40.00 Bi- Weekly)
	OTAL of Receipts This Page (optional) .			230.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 156 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Richard H. Wade		Date of Receipt
Mailing Address 1221 Cavalier Road		M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR328310419674
Arnold	MD 21012-2126	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer American Hospital Associa-	Occupation Sr. Vice President, Communications	
tion-Washingt Receipt For:	Aggregate Year-to-Date	
Primary General		P/R Deduction (\$50.00 Bi-
Other (specify) ▼	800.00	Weekly)
Full Name (Last, First, Middle Initial) Mr. Stephen M. Ahnen		Date of Receipt
Mailing Address 1001 N. Potomac St.		M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR328312719674
Arlington	VA 22205-1629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer American Hospital Associa-	Occupation Senior Vice President	
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	
Primary General		P/R Deduction (\$50.00 Bi-
Other (specify) ▼	800.00	Weekly)
Full Name (Last, First, Middle Initial) Ms. Lori M. Schor	I.	Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR328341819674
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Political Action & Grassroot	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	880.00	P/R Deduction (\$40.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		280.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	for eac	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 123 / 156 (check only one) X
An or	y information copied from such Reports and S for commercial purposes, other than using the	atements may not be so name and address of a	old or used by any person ny political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700			M M / D D / Y Y Y Y
	City Washington	State Zip 0	Code 04-2818	Transaction ID: PR328490119674 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		21.74
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼	Occupation Sr. Associate Dire Aggregate Year-to-E		P/R Deduction (\$10.86 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina Mailing Address 200 Clover Hill Court			Date of Receipt
	City	Code	- " DD000511010C74	
	Yardley		67-5736	Transaction ID: PR328511819674 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	3730	95.20
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executiv	ve	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	Date ▼ 1047.20	P/R Deduction (\$47.60 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell			Date of Receipt
	Mailing Address 909 N. Madison St.			M M / D D / Y Y Y Y
	City	State Zip C		Transaction ID: PR328512019674
	<u>Arlington</u>	VA 2220	05-1655	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Vice President, M Aggregate Year-to-E		
	Primary General Other (specify) ▼	Aggregate Tear-to-L	440.00	P/R Deduction (\$20.00 Bi- Weekly)
	UBTOTAL of Receipts This Page (optional)			156.94

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u></u>	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey			Date of Receipt
	Mailing Address One North Franklin St	reet		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR329013419674
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Director,	n Psychiatric and Substance A	
	Receipt For:	+	e Year-to-Date ▼	7
	Primary General Other (specify) ▼	0 0	400.00	P/R Deduction (\$25.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD			Date of Receipt
	Mailing Address One North Franklin			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR329071319674
	Chicago	<u>IL</u>	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Presiden	n t & COO, Leadership & Busir	ness
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		800.00	P/R Deduction (\$50.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W		M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR329084419674
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		43.48
	Name of Employer American Hospital Associa- tion-Washingt		ssociate Director Executive E	Br
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		413.06	P/R Deduction (\$21.72 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	1		193.48

or fo	rinformation copied from such Reports and Sor commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be s name and address of a	sold or used by any person any political committee to s	n for the purpose of soliciting contributions
<u></u>	American Hospital Association PAC			onon continuations from such confinitios.
1	T. II Niemes (Leat First Middle Initial)			
_	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese			Date of Receipt
ľ	Mailing Address 500 Interstate Bouleva	rd South		M " M / D " D / Y " Y " Y " Y
	City		Code	Transaction ID: PR329215719674
1	Nashville	TN 372	210-4634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
1	Name of Employer American Hospital Associa-	Occupation Regional Executi	ivo	-
	tion-Chicago Receipt For:	Aggregate Year-to-l		-
	Primary General	Aggregate real-to-t		P/R Deduction (\$50.00 Bi-
	Other (specify)		800.00	Weekly)
	Full Name (Last, First, Middle Initial) Ms. Patricia Meersman			Date of Receipt
-	Mailing Address One North Franklin	M M / D D / Y Y Y Y		
(City	State Zip	Code	Transaction ID: PR330343319674
(Chicago	IL 606	606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing rederal political committee.	C		20.00
1	Name of Employer American Hospital Associa-	Occupation	D : .	1
<u>t</u>	tion-Chicago ' Receipt For:	Executive Service		
r	Primary General	Aggregate Year-to-I	Date ▼	D/D Doduction (\$10.00 Bi
	Other (specify) ▼	0 0 0	220.00	P/R Deduction (\$10.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt			Date of Receipt
-	Mailing Address One North Franklin			M M / D D / Y Y Y Y Y
(City	State Zip	Code	Transaction ID: PR330411619674
<u>(</u>	Chicago	IL 606	606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
/	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Region	nal Executive	_
	Receipt For:	Aggregate Year-to-l		7
	Primary General Other (specify) ▼	0 0 0	400.00	P/R Deduction (\$25.00 Bi- Weekly)
	IBTOTAL of Receipts This Page (optional)			170.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Pa	ne (crieck offly offe)
Ar or	ny information copied from such Reports and Stor commercial purposes, other than using the	Statements may not be sold or used by a e name and address of any political comi	ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>/_</u>	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca		Date of Receipt
	Mailing Address 4960 138th Circle We	st	M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR330475419674
	Apple Valley	MN 55124-9229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa-	Occupation Regional Executive	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	880	I WEEKIV)
_	Full Name (Last, First, Middle Initial)		
	Ms. Jennifer E. Mallard	Date of Receipt	
	Mailing Address 6109 North 9th Road	M M / D D / Y Y Y Y	
	City	State Zip Code	Transaction ID: PR330534319674
	Arlington	VA 22205-1609	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer American Hospital Associa-	Occupation	
	tion-Washingt Receipt For:	Sr. Associate Director	
	Primary General	Aggregate Year-to-Date ▼	D/D Dadwation (\$05.00 Bi
	Other (specify)	400	.00 P/R Deduction (\$25.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Mr. Gene O'Dell		Date of Receipt
	Mailing Address 530 North Lakeshore Unit 2303	Drive	M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR330547719674
	Chicago	IL 60611-7424	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Strategic Plant	ning
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	320	.00 P/R Deduction (\$20.00 Bi-Weekly)
	UBTOTAL of Receipts This Page (optional) .	1	170.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>/</u>	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe			Date of Receipt
	Mailing Address One North Franklin			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR330549219674
	Chicago	IL	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa-	Occupatio	n sident, Member Relations	
	tion-Chicago Receipt For:		e Year-to-Date	
	Primary General Other (specify) ▼	7.tggrogate	440.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Walter J. Reiter			Date of Receipt
	Mailing Address 325 Seventh Street, NW Suite 700			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR330776119674
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		43.48
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio V.P., Adv	n vocacy & Member Communi	cations
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		478.28	P/R Deduction (\$21.74 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush			Date of Receipt
	Mailing Address 26 West Glendale Ave	•		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR331304219674
	Alexandria	VA	22301-2402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		38.48
	Name of Employer American Hospital Associa- tion-Washingt	, '	Advocacy and Public Policy	Ор
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary ☐ General Other (specify) ▼		423.26	P/R Deduction (\$19.02 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		121.96

SCHEDULE A (FEC FITEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 128 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such or for commercial purposes, other	Reports and Statements may not be than using the name and address of	sold or used by any persor any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Fi	,		
Full Name (Last, First, Middle I Mr. Alexander R. White, Jr.	nitial)		Date of Receipt
Mailing Address PO Box 15	5587		M M / D D / Y Y Y Y
City	•	Code	Transaction ID: PR331416019674
Austin	TX 78	761-5587	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		120.00
Name of Employer American Hospital Associa-	Occupation Regional Execut	tive	
tion Receipt For:	Aggregate Year-to		
Primary Genera Other (specify) ▼		1317.69	P/R Deduction (\$62.30 Bi- Weekly)
Full Name (Last, First, Middle I Mr. Donald May	nitial)		Date of Receipt
Mailing Address 521 Great	Falls Street	M M / D D / Y Y Y Y	
City	•	Code	Transaction ID: PR331533219674
Falls Church	VA 220	046-2613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		80.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President,	Policy	
Receipt For:	Aggregate Year-to	-Date ▼	
Primary Genera Other (specify) ▼		880.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle I Ms. Elizabeth Summy	nitial)		Date of Receipt
Mailing Address One North	Franklin		M M / D D / Y Y Y Y
City	State Zip	Code	Transaction ID: PR346168119674
Chicago	IL 600	606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		41.66
Name of Employer American Hospital Associa-	Occupation		
tion-Chicago	Executive Direct		-
Receipt For: Primary Genera	Aggregate Year-to	-Date ▼	P/P Doduction (#20.01 P:
Other (specify) ▼		416.60	P/R Deduction (\$20.91 Bi- Weekly)
SURTOTAL of Receipts This Pa	ge (optional)		241.66
	ge (optional)is line number only)	<u> </u>	241.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 156 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any persor name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
<u> </u>		
Full Name (Last, First, Middle Initial) Ms. Kristin Welsh		Date of Receipt
Mailing Address 325 Seventh Street, N' Suite 700	W	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR517619719674
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.40
Name of Employer American Hospital Associa-	Occupation]
tion-Washingt Receipt For:	Senior Director Executive Branch Rela	
Primary General	Aggregate Year-to-Date ▼	P/P Doduction (\$20.20 Pi
Other (specify) ▼	843.20	P/R Deduction (\$39.20 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson	<u> </u>	Date of Receipt
Mailing Address 606 South Royal Street	t	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR766023719674
<u>Alexandria</u>	VA 22314-4142	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.48
Name of Employer American Hospital Associa-	Occupation Senior Associate Director, Policy	
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	+
Primary General		P/R Deduction (\$57.50 Bi-
Other (specify)	384.78	Weekly)
Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky	1	Date of Receipt
Mailing Address 325 Seventh Street, N' Suite 700	W	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR876637219674
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Hospital Associa-	Occupation Senior Associate Director	1
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		P/R Deduction (\$10.00 Bi-
Other (specify) ▼	220.00	Weekly)
CURTOTAL of Descipts This Dags (entional)		136.88

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 156 (check only one) X
Any information copied from such Reports and Stor for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows			Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	V		M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR936292319674
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer American Hospital Associa- tion-Washingt	Occupatio Director	n of Operations	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		220.00	P/R Deduction (\$10.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional)	•	20.00
TOTAL This Period (last page this line number only)	•	114111.04

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 156 (check only one) 11a 11b 11c X 12 13 14 15 16 1
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) New York Hospital & Healthcare Assoc. FED PAC Mailing Address One Empire Drive City Rensselaer FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General	State Zip Code NY 12144 C C00160259 Occupation Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 14633046 Amount of Each Receipt this Period 35000.00
Full Name (Last, First, Middle Initial) Health Alliance of PA PAC - Federal Mailing Address Post Office Box 8600 City Harrisburg FEC ID number of contributing federal political committee. Name of Employer Receipt For:	State Zip Code PA 17105-8600 C C00128082 Occupation Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) AZHHA Political Action Committee (Federal) Mailing Address 2901 North Central Ave Suite 900 City Phoenix FEC ID number of contributing federal political committee. Name of Employer	84950.00 Enue State Zip Code AZ 85012 C C00217687 Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 156 (check only one) 11a 11b 11c 12 13 14 15 16 17 17
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NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Citibank, F.S.B. Mailing Address 1400 G Street, NW			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State DC	Zip Code 20005	Transaction ID: 14726488
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Name of Employer Receipt For: Primary General Other (specify) ▼	Occupatio Aggregate	e Year-to-Date ▼ 3444.65	Interest

SUBTOTAL of Receipts This Page (optional)	•	387.52
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only		133 / 156
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b		25 🗍 26
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NAME OF COMMITTEE (In Full)				
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SCHEDULE B (FEC Form 3X)

President

District:

FOR LINE NUMBER: PAGE 134 / 156 Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Transaction ID: 14726508 American Express Date of Disbursement 05 1[™]0 2007 Mailing Address Ste. 001 City State Zip Code Amount of Each Disbursement this Period IL 60679 Chicago 50.15 Purpose of Disbursement Merchant Fees 001 Candidate Name Category/ Type Office Sought: Disbursement For: House Merchant Fees General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: 14726603 Citibank, F.S.B. Date of Disbursement [™]0 18 2007 Mailing Address 1400 G Street, NW City State Zip Code Amount of Each Disbursement this Period 20005 Washington DC 76.92 Purpose of Disbursement Bank Fee 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Bank Fee Senate Primary General

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	City Seattle	State WA	Zip Code 98111		Amount of Each Disbursement this Period
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	Full Name (Last, First, Middle Initial) Team Emerson For Jo Ann Emerson				Transaction ID: 14729380 Date of Disbursement
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	Full Name (Last, First, Middle Initial) Bill Nelson For U S Senate				Transaction ID: 14729135 Date of Disbursement
	Mailing Address 500 Red Sail Way				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Satelite Beach	State FL	Zip Code 32937		Amount of Each Disbursement this Period
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Richard E Neal For Congress				Date of Disbursement 10 22 2007
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	City La Crosse	State Zip Code WI 54601				Amoun	nt of E	ach D	Isburs	-		-
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	City Fremont		State CA	Zip Co 9453			Amount of Each Disbursement this Perio
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	Mailing Address	P.O. Box 3709	1				1 0 M / D 2 5 / Y Y Y O Y 7
	City Charlotte		State NC	Zip Ci 2823			Amount of Each Disbursement this Perio
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	Full Name (Last, Friends of Jim	First, Middle Initial) Clyburn					Transaction ID: 14729404 Date of Disbursement
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ITEMIZED DISBURSEMENTS	Detailed Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29 3
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NAME OF COMMITTEE (In Full) American Hospital Association PAC	, , ,		
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Mailing Address 213 Lisbon Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
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Full Name (Last, First, Middle Initial) BRIDGE PAC			Transaction ID: 14729459 Date of Disbursement
Mailing Address 499 South Capitol Suite 114	St., SW		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
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